### Case 17-24020 Doc 1 Filed 08/11/17 Entered 08/11/17 10:45:13 Desc Main Document Page 1 of 73

| Fill in this information to identify your case:                                 |   |                                    |
|---|---|------------------------------------|
| United States Bankruptcy Court for the:  Northern District of: Illinois (State) |   |                                    |
| Case number (if known)  | Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | art 1: Identify Yourself   |                            |   |
|----|--|----------------------------|---|
|    |  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name   | Nayshon                    |   |
|    |  | First name                 | First name                                    |
|    | Write the name that is on<br>your government-issued<br>picture identification (for<br>example, your driver's | T.                         |   |
|    |  | Middle name                | Middle name                                   |
|    |  | Mosley                     |   |
|    | license or passport  | Last name                  | Last name                                     |
|    | Bring your picture   |                            |   |
|    | identification to your meeting with the trustee.   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| _  | meeting with the trustee.  |                            |   |
| 2. | All other names you  | Nayshon                    |   |
|    | have used in the last  | First name                 | First name                                    |
|    | 8 years  | T.                         | No. 1 II                                      |
|    | Include your married or  | Middle name                | Middle name                                   |
|    | maiden names.  | Rosebourgh                 |   |
|    |  | Last name                  | Last name                                     |
|    |  | First name                 | First name                                    |
|    |  | First name                 | riistriane                                    |
|    |  | Middle name                | Middle name                                   |
|    |  | WilderFlame                | Wilder Harrie                                 |
|    |  | Last name                  | Last name                                     |
| 3. | Only the last 4 digits   | XXX - XX- 5374             | xxx - xx-                                     |
|    | of your Social<br>Security number or   |                            |   |
|    | federal Individual   | OR                         | OR  |
|    | Taxpayer Identification number   | 9 xx - xx-                 | 9 xx - xx-                                    |
|    | (ITIN)   |                            |   |

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| Debtor 1 Nayshon First Name                                    | T. Mosley Middle Name Last Name   | Case number (if known)   |
|--|---|--|
|  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4. Any business names and Employer                             | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
| Identification Numbers (EIN) you have used in the last 8 years | Business name   | Business name  |
| 8 years  | Business name   | Business name  |
| Include trade names and doing business as names                | EIN   | EIN  |
|  | EIN   | EIN  |
| 5. Where you live  |   | If Debtor 2 lives at a different address:  |
|  | 5406 S. Indiana Ave., Apt. 4N  Number Street  | Number Street  |
|  | Chicago Illinois 60615 City State Zip Code  | City State Zip Code  |
|  | Cook  |  |
|  | County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|  | Number Street   | Number Street  |
|  | City State Zip Code   | City State Zip Code  |
| 6. Why you are choosing this district                          | Check one:  | Check one:   |
| to file for bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                               |
|  | I have another reason. Explain. (See 28 U.S.C. §§ 1408.   | I have another reason. Explain. (See 28 U.S.C. §§ 1408.)   |
|  |   | _  |
|  |   | -  |
|  |   |  |
|  |   |  |
|  |   |  |

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| Debtor 1 Nayshon  | Т.   | Mosley   | Case number (if knd  | own)  |
|---|--|--|--|---|
| First Name  | Middle Name  | Last Name  |  |   |
| Part 2: Tell the Court Ab   | out Your Bankruptcy Ca   | ase  |  |   |
| 7. The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under   |  | description of each, see <i>Notice Req</i> 0)). Also, go to the top of page 1 and  |  |   |
| 8. How you will pay the fee   | more details about cashier's check, or may pay with a crec  I need to pay the foundividuals to Pay  I request that my found in judge may, but is not the official poverty you choose this op | how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-printere in installments. If you choose Your Filing Fee in Installments (Cofee be waived (You may request ot required to, waive your fee, and line that applies to your family significant or the property of the property | ou are paying the submitting you ed address. ethis option, sign official Form 103 this option only ad may do so onlize and you are used. | the clerk's office in your local court for e fee yourself, you may pay with cash, it payment on your behalf, your attorney an and attach the <i>Application for</i> (A).  If you are filing for Chapter 7. By law, a ly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. Have you filed for<br>bankruptcy within the<br>last 8 years?   | Yes. District District District  | When<br>When<br>When   | MM / DD / YYYY  MM / DD / YYYY  MM / DD / YYYY   | Case number  Case number  Case number   |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ✓ No.  Yes. Debtor  District  Debtor  District   | <u>W</u> hen   | MM / DD / YYYY   | Relationship to you  Case number, if known  Relationship to you  Case number, if known  |
| 11. Do you rent your residence?   | ✓ No. Go to  Yes. Fill ou  | · -  |  | o you want to stay in your residence?  Set You (Form 101A) and file it with   |

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Τ. Mosley Debtor 1 Nayshon Case number (if known) Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have  $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Nayshon
 T.
 Mosley
 Case number (if known)

 Last Name

| Pa   | rt 5: Explain Your Effor  | rts to Receive a Brie   | fing About Credit Counseling   |   |  |  |  |
|--|---|---|--|---|--|--|--|
|  |   | About Debtor 1:   |  | Al  | bout Debtor 2 (Sp  | oouse Only in a Joint Case):   |  |
| 15.  | Tell the court  | You must check one:   |  | Yo  | ou must check one:   |  |  |
|  | whether you have received briefing about credit counseling.   | counseling agen   | ing from an approved credit<br>cy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.   |   | counseling ager  | ing from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, and I received a<br>npletion.  |  |
|  | The law requires that you receive a briefing  |   | he certificate and the payment plan, veloped with the agency.  |   |  | he certificate and the payment plan, veloped with the agency.  |  |
| ab<br>co<br>file<br>Yc<br>ch<br>fol<br>yo        | about credit<br>counseling before you<br>file for bankruptcy.<br>You must truthfully                      | counseling agen   | ing from an approved credit<br>cy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.  |   | counseling ager  | ring from an approved credit<br>ncy within the 180 days before I<br>ptcy petition, but I do not have a<br>npletion.  |  |
|  | check one of the following choices. If you cannot do so, you are not eligible to file.                    |   | er you file this bankruptcy petition, opy of the certificate and payment   |   |  | er you file this bankruptcy petition, opy of the certificate and payment   |  |
|  | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques   | ked for credit counseling services<br>d agency, but was unable to<br>vices during the 7 days after I<br>t, and exigent circumstances<br>emporary waiver of the   |   | from an approve<br>obtain those ser<br>made my reques  | ked for credit counseling services<br>ed agency, but was unable to<br>vices during the 7 days after I<br>st, and exigent circumstances<br>emporary waiver of the             |  |
| creditors can begin collection activities again. | requirement, attac<br>efforts you made t<br>unable to obtain it   | 30-day temporary waiver of the attach a separate sheet explaining what ade to obtain the briefing, why you were ain it before you filed for bankruptcy, and circumstances required you to file this |  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, ar what exigent circumstances required you to file this case. |  |  |  |
|  |   |   | e dismissed if the court is dissatisfied<br>for not receiving a briefing before<br>ruptcy.   |   |  | e dismissed if the court is dissatisfied<br>for not receiving a briefing before<br>ruptcy.   |  |
|  |   | receive a briefing<br>must file a certifica<br>with a copy of the   | satisfied with your reasons, you must still efing within 30 days after you file. You rificate from the approved agency, along f the payment plan you developed, if any. do so, your case may be dismissed. |   | If the court is satisfied with your reasons, you must receive a briefing within 30 days after you file. You must file a certificate from the approved agency, a with a copy of the payment plan you developed, if If you do not do so, your case may be dismissed. |  |  |
|  |   |   | ne 30-day deadline is granted only mited to a maximum of 15 days.  |   | Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.   |  |  |
|  |   | I am not required counseling beca   | d to receive a briefing about credit use of:   |   | I am not required counseling beca  | d to receive a briefing about credit ause of:  |  |
|  |   | ☐ Incapacity.   | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |   | Incapacity.  | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.   |  |
|  |   | Disability.   | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so.                               |   | Disability.  | My physical disability causes me to<br>be unable to participate in a<br>briefing in person, by phone, or<br>through the internet, even after I<br>reasonably tried to do so. |  |
|  |   | Active duty.  | I am currently on active military duty in a military combat zone.  |   | Active duty.   | I am currently on active military duty in a military combat zone.  |  |
|  |   | about credit coun   | are not required to receive a briefing seling, you must file a motion for punseling with the court.  |   | about credit cour  | are not required to receive a briefing seling, you must file a motion for ounseling with the court.  |  |

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| Debtor 1 Nayshon First Name   |  | Mosley (   | Case number (if known)   |  |
|---|--|--|--|--|
|   | estions for Reporting Purposes   |  |  |  |
| 16. What kind of debts do you have?   | "incurred by an individua<br>No. Go to line 16b.<br>Yes. Go to line 17.<br>16b. Are your debts primarily   | I primarily for a personal,  The business debts? Busine  Investment or through the   | family, or household purpose."  ess debts are debts that you incurred to obe operation of the business or investment.  umer debts or business debts.   | otain                                      |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that to No.  | r 7. Do you estimate that aft  | er any exempt property is excluded and admi<br>stribute to unsecured creditors?  | nistrative                                 |
| 18. How many creditors do you estimate that you owe?  | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,00  | 25,001-50,000  50,001-100,000  More than 100,000   | )  |
| 19. How much do you estimate your assets to be worth?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001   | \$50 million   | 10 billion<br>\$50 billion                 |
| 20. How much do you estimate your liabilities to be?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million   | \$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001   | \$50 million   | 10 billion<br>\$50 billion                 |
| Part 7: Sign Below  | Lhave avenuinad this natition a  |  | y of perjury that the information provided   | is twice and                               |
| For you   | correct.  If I have chosen to file under Cl of title 11, United States Code under Chapter 7.  If no attorney represents me an out this document, I have obtain I request relief in accordance we I understand making a false state connection with a bankruptcy of both. 18 U.S.C. §§ 152, 1341, | hapter 7, I am aware that. I understand the relief and I did not pay or agree to ined and read the notice of the chapter of title 11 atement, concealing properse can result in fines up | I may proceed, if eligible, under Chapter 7, vailable under each chapter, and I choose to pay someone who is not an attorney to brequired by 11 U.S.C. § 342(b).  United States Code, specified in this petierty, or obtaining money or property by fraction to \$250,000, or imprisonment for up to 2 | 11,12, or 13 to proceed nelp me fill tion. |
|   | Signature of Debtor 1  |  | Signature of Debtor 2  |  |
|   | Executed on 8/11/2017<br>MM / DI   | D/YYYY   | Executed onMM / DD / YYYY  |  |

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| Debtor 1 Nayshon                                 | T.                         | Mosley                        | Case number (iii   | fknown)  |
|--|----------------------------|-------------------------------|--------------------|--|
| First Name                                       | Middle Name                | Last Name                     |                    |  |
| For your attorney, if you are represented by one | eligibility to proceed und | der Chapter 7, 11, 12, or 13  | of title 11, Unite | nave informed the debtor(s) about<br>ad States Code, and have explained the<br>also certify that I have delivered to the |
| If you are not                                   | debtor(s) the notice requ  | ired by 11 U.S.C. § 342(b) a  | and, in a case in  | which § 707(b)(4)(D) applies, certify that I   |
| represented by an                                | have no knowledge after    | r an inquiry that the informa | tion in the sched  | dules filed with the petition is incorrect.  |
| attorney, you do not                             | •                          |                               |                    | ·  |
| need to file this page.                          | /s/ Ronak Y Shah           |                               | Date               | 8/11/2017  |
|  | Signature of Attorney f    | or Debtor                     | <del></del>        | MM / DD / YYYY   |
|  | ,                          |                               |                    |  |
|  |                            |                               |                    |  |
|  | Ronak Y Shah               |                               |                    |  |
|  | Printed name               |                               |                    |  |
|  | Semrad Law Firm            |                               |                    |  |
|  | Firm name                  |                               |                    |  |
|  | 11101 S. Western Ave       | enue                          |                    |  |
|  | Street                     |                               |                    |  |
|  |                            |                               |                    |  |
|  |                            |                               |                    |  |
|  | Chicago                    | Illinoi                       | s                  | 60643  |
|  | City                       | State                         |                    | Zip Code   |
|  |                            |                               |                    |  |
|  | Contact phone              |                               | Email address      | rshah@semradlaw.com  |
|  |                            |                               |                    |  |
|  |                            |                               | Illinois State     | <u> </u>   |
|  | Bar number                 |                               |                    |  |

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| Fill in this information to identify your case: |            |             |                              |   |  |  |  |
|---|------------|-------------|------------------------------|---|--|--|--|
| Debtor 1  | Nayshon    | T.          | Mosley                       |   |  |  |  |
|   | First Name | Middle Name | Last Name                    |   |  |  |  |
| Debtor 2  |            |             |                              |   |  |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name                    |   |  |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois (State) | _ |  |  |  |
| Case number<br>(If known)                       |            |             | (State)                      |   |  |  |  |

| Check | if t | his   | is | an |
|-------|------|-------|----|----|
| amend | ed   | filir | ng |    |

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

|  | Your assets Value of what you own                  |
|--|--|
|  |  |
| . Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B            | \$0.00   |
| Ta. Copy line 35, Total leal estate, Iloth <i>Schedule Pro</i>   | <b>*************************************</b>       |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$20,485.98<br>—                                   |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$20,485.98  |
| art 2: Summarize Your Liabilities  |  |
|  | Your liabilities                                   |
|  | Amount you owe                                     |
| . Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)                                   |  |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$18,815.00<br>——————————————————————————————————— |
| . Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)   | \$0.00   |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                     |  |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F                  | \$9,518.17   |
|  | \$28,333.17  |
| Your total liabilities   |  |
| Part 3: Summarize Your Income and Expenses   |  |
| Part 3: Summarize Your Income and Expenses   |  |
| art 3: Summarize Your Income and Expenses  . Schedule I: Your Income (Official Form 106I)                          | \$6,161.39   |
|  | \$6,161.39   |
| Summarize Your Income and Expenses  Schedule I: Your Income (Official Form 106I)                                   | \$6,161.39<br>\$5,601.00                           |

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| Debt   | tor 1 Nayshon  | T.   | Mosley  | Case number (if known)  |            |  |  |  |  |  |
|--|--|--|---|---|------------|--|--|--|--|--|
| Part 4   | First Name  Answer These (   | Middle Name  | Last Name   | łe  |            |  |  |  |  |  |
| rail   | Part 4: Answer These Questions for Administrative and Statistical Records  |  |   |   |            |  |  |  |  |  |
| 6. <b>A</b> ı  | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?  |  |   |   |            |  |  |  |  |  |
|  | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. |  |   |   |            |  |  |  |  |  |
| Ŀ  | ✓ Yes.   |  |   |   |            |  |  |  |  |  |
| 7 14   | 7. What kind of debt do you have?  |  |   |   |            |  |  |  |  |  |
| /. W   | •  |  |   |   |            |  |  |  |  |  |
| Ŀ  |  |  | imer debts are those incurred by<br>Fill out lines 8-10 for statistical p | an individual primarily for a personal, urposes. 28 U.S.C. § 159. |            |  |  |  |  |  |
| Г  | ☐ Your debts are not   | primarily consumer debts. Yo   | ou have nothing to report on this   | s part of the form. Check this box and su                         | ıbmit      |  |  |  |  |  |
|  | this form to the court   | with your other schedules.   |   |   |            |  |  |  |  |  |
| 8. <b>F</b>  | From the Statement of  | Your Current Monthly Incom   | ne: Copy your total current mont  | hlv income from Official  | \$5,835.00 |  |  |  |  |  |
|  |  | <b>R</b> , Form 122B Line 11; <b>OR</b> , Fo   |   |   | 40,000.00  |  |  |  |  |  |
| 9.   | Convitte following sp  | ocial catogories of claims fro   | om Part 4 line 6 of Schodule I  | =/E·  |            |  |  |  |  |  |
| J.   |  | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: |   |   |            |  |  |  |  |  |
|  | From Part 4 on Sched   | ule E/F, copy the following:   |   | Total claim   |            |  |  |  |  |  |
|  | 9a. Domestic support o   | bligations (Copy line 6a.)   |   | \$0.00  |            |  |  |  |  |  |
|  | 9b. Taxes and certain o  | ther debts you owe the govern  | ment. (Copy line 6b.)   | \$0.00  |            |  |  |  |  |  |
|  |  | , ,  | , ,,  | \$0.00  |            |  |  |  |  |  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  9d. Challent Israel (Copy line 6f.)  \$0.00 |  |  |   |   |            |  |  |  |  |  |
|  | 9d. Student loans. (Cop  | by line 6f.)   | φυ.υυ<br>——————————————————————————————————                               |   |            |  |  |  |  |  |
|  | 9e. Obligations arising opriority claims. (Copy lin  |  | or divorce that you did not report  | \$0.00 t as   |            |  |  |  |  |  |
|  | 9f. Debts to pension or  | profit-sharing plans, and other  | similar debts. (Copy line 6h.)  | \$0.00  |            |  |  |  |  |  |
|  | •  |  | ,   |   |            |  |  |  |  |  |

\$0.00

9g. Total. Add lines 9a through 9f.

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| En .                                   | :  |   |   |                                   |  |   |  |                                       |  |
|--|--|---|---|-----------------------------------|--|---|--|---------------------------------------|--|
| Fill in this                           | information  | n to identify your c  | ase:  |                                   |  |   |  |                                       |  |
| Debtor 1                               |  | shon<br>Name  | T.<br>Middle N  | Nomo                              | Mosley<br>Last Name  |   |  |                                       |  |
| Debtor 2                               | FIISI  | Name  | Wildule I   | Name                              | Last Name  |   |  |                                       |  |
| (Spouse, if fi                         | ling) First  | Name  | Middle N  | Name                              | Last Name  |   |  |                                       |  |
| United Sta                             | ates Bankru  | ptcy Court for the:   | Northern  |                                   | District of Illinois   |   |  |                                       |  |
| Case num                               | bor  |   |   |                                   | (State)  |   |  |                                       |  |
| (If known)                             |  |   |   |                                   |  |   |  |                                       |  |
| Officia                                | l Form   | 106A/B  |   |                                   |  |   |  | Check if this is an                   |  |
|  |  |   |   |                                   |  |   |  | amended filing                        |  |
| Sche                                   | dule A   | /B: Prope   | rty   |                                   |  |   |  | 12/1                                  |  |
| category v<br>responsibl<br>write your | where you<br>le for suppl<br>name and              | think it fits best. E<br>lying correct infor<br>case number (if k | Be as complete a<br>mation. If more s<br>known). Answer e | and accu<br>space is<br>every que | set only once. If an asset fits in mo<br>irate as possible. If two married peo<br>needed, attach a separate sheet to<br>estion.<br>Other Real Estate You Own or I  | ople are<br>this fo   | e filing together, both a<br>rm. On the top of any a | re equally                            |  |
| 1. Do you                              | ı own or ha  | ave any legal or ed   | quitable interest   | in any r                          | esidence, building, land, or similar p   | propert   | y?   |                                       |  |
| ~                                      | No. Go to  | Part 2  |   |                                   |  |   |  |                                       |  |
|  | Yes. Where   | e is the property?  |   |                                   |  |   |  |                                       |  |
|  |  |   |   | What                              | is the property? Check all that apply.   |   |  | claims or exemptions. Put             |  |
| 1.1                                    | Street address, if available, or other description |   | Single-family home  Duplex or multi-unit building         |                                   |  | the amount of any secured claims on Schedule a<br>Creditors Who Have Claims Secured by Property |  |                                       |  |
|  |  |   |   |                                   |  | Current value of the  | Current value of the                                 |                                       |  |
|  |  |   |   |                                   | andominium or cooperative<br>anufactured or mobile home  |   | entire property?                                     | portion you own?                      |  |
|  |  |   |   |                                   | nd   |   |  |                                       |  |
|  | Number   | Street  |   | Inv                               | vestment property  |   | Describe the nature of interest (such as fee s       |                                       |  |
|  | City   | Stata   | Zin Codo  |                                   | neshare<br>her   |   | the entireties, or a life                            |                                       |  |
|  | City State   |   | Zip Code  |                                   |  |   | Check if this is community property                  |                                       |  |
|  |  |   |   | Who h                             | as an interest in the property? Chec   | ck  | (see instructions)                                   | mmunity property                      |  |
|  |  |   |   | one.                              |  |   |  |                                       |  |
|  |  |   |   |                                   | btor 1 only<br>btor 2 only   |   |  |                                       |  |
|  |  |   |   | ш                                 | btor 1 and Debtor 2 only   |   |  |                                       |  |
|  |  |   |   | ш                                 | least one of the debtors and another   |   |  |                                       |  |
|  |  |   |   | Other                             | information you wish to add about to   | this ite  | m, such as local                                     |                                       |  |
|  |  |   |   |                                   | rty identification number:   |   | •  |                                       |  |
| If you                                 | own or hav   | re more than one, li  | st here:  | What                              | is the property? Check all that apply.   |   | Do not doduct socured                                | claims or exemptions. Put             |  |
| 1.2                                    |  |   |   |                                   | ngle-family home   |   | the amount of any secu                               | red claims on Schedule D:             |  |
|  | Street add   | ress, if available, or  | other description   | Du                                | plex or multi-unit building  |   |  | ims Secured by Property.              |  |
|  |  |   |   | . 🗖 Co                            | andominium or cooperative  |   | Current value of the entire property?                | Current value of the portion you own? |  |
|  |  |   |   | ш                                 | anufactured or mobile home   |   |  | <del></del>                           |  |
|  | Number   | Street  |   |                                   | nd<br>vestment property  |   | Describe the nature of                               | f your ownership                      |  |
|  |  |   |   |                                   | neshare  |   | interest (such as fee s<br>the entireties, or a life |                                       |  |
|  | City   | State   | Zip Code  | Hot                               | her  |   |  |                                       |  |
|  |  |   |   | Wha h                             | an an interest in the manager of Char  | ماد   |  | mmunity property                      |  |
|  |  |   |   | one.                              | as an interest in the property? Chec   | CK  | (see instructions)                                   |                                       |  |
|  |  |   |   | De                                | btor 1 only  |   | _  |                                       |  |
|  |  |   |   |                                   | btor 2 only  |   |  |                                       |  |
|  |  |   |   |                                   | btor 1 and Debtor 2 only   |   |  |                                       |  |
|  |  |   |   |                                   | least one of the debtors and another   | 4L! - ''  |  |                                       |  |
|  |  |   |   |                                   | information you wish to add about to receive the state of | tnis ite  | m, sucn as local                                     |                                       |  |

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| Debtor 1                       | Nayshon<br>First Name                                     | T.<br>Middle Name                             | Mosley<br>Last Name   | Case numbe    | (if known)                                       |   |
|--------------------------------|---|---|---|---------------|--|---|
|                                | et address, if available, or oth                          |   | Vhat is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land                 | apply.        | the amount of any secu                           | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| City                           | State   | ]<br>]<br>]<br>]                              | Investment property Timeshare Other  Who has an interest in the propert Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an | nother        | Check if this is co (see instructions)           | imple, tenancy by<br>e estate), if known.   |
|                                | the dollar value of the por<br>ve attached for Part 1. Wr | p<br>tion you own for a<br>ite that number he |   |               |  |   |
| <b>Do you ow</b><br>you own tl | nat someone else drives. If y                             | equitable interest<br>ou lease a vehicle, a   | in any vehicles, whether they are   |               |  |   |
| 3. Cars, va No Yes             |   | lity vehicles, motoro                         | cycles  |               |  |   |
| 3.1                            | Make<br>Model:<br>Year:<br>Approximate mileage:           | Ford<br>Edge<br>2013<br>94000                 | Who has an interest in the proone.  Debtor 1 only   | perty? Check  | the amount of any secu<br>Creditors Who Have Cla | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  |
|                                | Other information:  |   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors as Check if this is community instructions)  |               | Current value of the entire property? \$14325.00 | Current value of the portion you own?<br>\$14325.00   |
| 3.2                            | Make<br>Model:<br>Year:                                   |   | Who has an interest in the proone.  Debtor 1 only   | pperty? Check | the amount of any secu                           | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.                                     |
|                                | Approximate mileage: Other information:                   |   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors at Check if this is community instructions)  |               | Current value of the entire property?            | Current value of the portion you own?   |

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| otor i | Nayshon<br>First Name                                     | T.<br>Middle Name | Mosley  Last Name   | Case number   | er (if known)                                |   |
|--------|---|-------------------|---|---|--|---|
| 3.3    | Make Model: Year: Approximate mileage: Other information: |                   | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communing instructions) | nly<br>s and another                                    | the amount of any secu                       | claims or exemptions. Purified claims on <i>Schedule Laims Secured by Property.</i> Current value of the portion you own? |
| 3.4    | Make Model: Year: Approximate mileage: Other information: | <u></u>           | Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this is communication.          | nly<br>s and another                                    | the amount of any secu                       | claims or exemptions. Pured claims on Schedule Enims Secured by Property.  Current value of the portion you own?          |
|        |   |                   | instructions)   |   |  |   |
|        | nples: Boats, trailers, motor<br>No<br>Yes                | •                 | er recreational vehicles, other is, fishing vessels, snowmobiles, in the who has an interest in the one.  | motorcycle accessori                                    | Do not deduct secured the amount of any secu | claims or exemptions. Pu<br>rred claims on <i>Schedule L</i>  |
| Exar   | mples: Boats, trailers, motor<br>No<br>Yes<br>Make        | •                 | er recreational vehicles, other<br>t, fishing vessels, snowmobiles, i<br>Who has an interest in the   | motorcycle accessori property? Check  hly s and another | Do not deduct secured the amount of any secu | •   |

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Mosley Debtor 1 Nayshon Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Living Room Set, Couch, Bed \$400.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... TV, Cell Phone, Laptop, Tablet \$650.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$400.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Wedding Ring \$2500.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3950.00 for Part 3. Write that number here .....

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Mosley Debtor 1 Nayshon Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes ..... Cash: ..... 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: 17.1. Checking account: Chase \$24.00 \$0.00 17.2. Checking account: United Credit Union 17.3. Savings account: Chase \$0.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture % of ownership: Name of entity Yes. Give specific information about

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| Deb | tor 1 Nayshon First Name                        | I .<br>Middle Name  | Mosley<br>Last Name           | Case number (if known)                   | <del>-</del> |
|-----|---|---|-------------------------------|--|--------------|
| 20. | Government and corp<br>Negotiable instruments   | porate bonds and other negotia<br>include personal checks, cashiers<br>tents are those you cannot transfe | ble and non-negotiable i      | s, and money orders.                     |              |
|     | ✓ No  Yes. Give specific information about them | Issuer name:  |                               |  |              |
|     |   |   |                               |  |              |
| 0.1 | Detirement or neurice                           |   |                               |  | -,           |
| 21. | Examples: Interests in I                        |   | ), thrift savings accounts,   | or other pension or profit-sharing plans |              |
|     | No ✓ Yes. List each                             | Type of account:  | Institution name:             |  |              |
|     | account separately.                             | 401(k) or similar plan:   |                               |  |              |
|     | ,   | Pension plan:   | AXA Equitable                 |  | \$2186.98    |
|     |   | IRA:  |                               |  |              |
|     |   | Retirement account:   |                               |  |              |
|     |   | Keogh:  |                               |  |              |
|     |   | Additional account:  Additional account:  |                               |  | _            |
| 22. |   | I prepayments<br>d deposits you have made so that<br>with landlords, prepaid rent, publi                  |                               |  |              |
|     | Yes   | Electric:   | -                             |  |              |
|     |   | Gas:  |                               |  | _            |
|     |   | Heating oil:  |                               |  |              |
|     |   | Security deposit on rental unit:  | -                             |  | _            |
|     |   | Prepaid rent:   |                               |  | _            |
|     |   | Telephone:  Water:  |                               |  |              |
|     |   | Rented furniture:   |                               |  |              |
|     |   | Other:  |                               |  | _            |
| 23. | Annuities (A contract for                       | or a periodic payment of money to   | you, either for life or for a | number of years)                         |              |
|     | ✓ No ☐ Yes                                      | Issuer name and description:  |                               |  |              |
|     |   |   |                               |  |              |
|     |   |   |                               |  |              |
|     |   | -   |                               |  |              |

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| Debt | or 1 Nayshon   | T.   | Mosley                              | Case number (if known)   |  |
|------|--|--|-------------------------------------|--|--|
|      | First Name   | Middle Name  | Last Name                           |  |  |
| 24.  |  | education IRA, in an account in a 0(b)(1), 529A(b), and 529(b)(1).   | qualified ABLE program, or          | ınder a qualified state tuition program.   |  |
|      | ✓ No In Yes  | stitution name and description. Sepa   | arately file the records of any int | erests.11 U.S.C. § 521(c):   |  |
|      | _  |  |                                     |  |  |
| 25.  |  | e or future interests in property (  | other than anything listed in       | line 1) and rights or nowers   |  |
|      | exercisable for  |  |                                     | o .,, aago o. pono.o   |  |
|      | Yes. Describe  | e  |                                     |  |  |
| 26.  |  | ghts, trademarks, trade secrets, a<br>et domain names, websites, proceed   |                                     |  |  |
|      | ✓ No  Yes. Describe  | e  |                                     |  |  |
| 0.7  |  |  |                                     |  |  |
| 27.  |  | hises, and other general intangibling permits, exclusive licenses, coope   |                                     | uor licenses, professional licenses  |  |
|      | <b>✓</b> No  |  |                                     |  |  |
|      | Yes. Describe  | e  |                                     |  |  |
|      |  |  |                                     |  |  |
|      |  |  |                                     |  |  |
| Mon  | ey or property   | owed to you?   |                                     |  | Current value of the portion you own?  Do not deduct secured claims or exemptions.   |
|      | ey or property  Tax refunds owe  |  |                                     |  | portion you own? Do not deduct secured   |
|      | Tax refunds owe  |  |                                     |  | portion you own? Do not deduct secured   |
|      | Tax refunds owe  | d to you   |                                     | Federal:   | portion you own? Do not deduct secured   |
|      | Tax refunds ower  No Yes. Give speabout the you alre   | d to you  crific information nem, including whether ady filed the returns  |                                     | Federal:<br>State:   | portion you own? Do not deduct secured claims or exemptions.   |
| 28.  | Tax refunds ower  No Yes. Give spe about th you alre and the   | d to you  cific information nem, including whether   |                                     |  | portion you own? Do not deduct secured claims or exemptions.   |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  | d to you  ecific information nem, including whether ady filed the returns tax years  | pport, child support, maintena      | State:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                       |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  Family support  Examples: Past do  No   | d to you  crific information nem, including whether ady filed the returns tax years  | pport, child support, maintena      | State:<br>Local:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                       |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  Family support  Examples: Past do  No   | d to you  ecific information nem, including whether ady filed the returns tax years  | pport, child support, maintena      | State:  Local:  nce, divorce settlement, property settlemen                            | portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00                                       |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  Family support  Examples: Past do  No   | d to you  crific information nem, including whether ady filed the returns tax years  | pport, child support, maintena      | State:  Local:  nce, divorce settlement, property settlement Alimony:                  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 tt \$0.00                               |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  Family support  Examples: Past do  No   | d to you  crific information nem, including whether ady filed the returns tax years  | pport, child support, maintena      | State:  Local:  nce, divorce settlement, property settlement  Alimony:  Maintenance:   | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00 t \$0.00                                |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  Family support  Examples: Past do  No   | d to you  crific information nem, including whether ady filed the returns tax years  | pport, child support, maintena      | State: Local:  Alimony: Maintenance: Support:  | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  t \$0.00 \$0.00 \$0.00                 |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alreand the  Family support Examples: Past dual No Yes. Give speach Other amounts sexamples: Unpaid  | d to you  cific information nem, including whether ady filed the returns tax years   | ts, disability benefits, sick pay,  | State: Local:  Alimony: Maintenance: Support: Divorce settlement:                      | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds ower  ✓ No  Yes. Give speabout the you alread the series: Past dual formation of the series of the se  | ecific information nem, including whether ady filed the returns tax years  ue or lump sum alimony, spousal su ecific information | ts, disability benefits, sick pay,  | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28.  | Tax refunds ower  No Yes. Give speabout the you alread the service and the ser | ecific information nem, including whether ady filed the returns tax years  ue or lump sum alimony, spousal su ecific information | ts, disability benefits, sick pay,  | State: Local:  Alimony: Maintenance: Support: Divorce settlement: Property settlement: | portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  tt  \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb <sup>-</sup> | tor 1 Nayshon  | Т.  | Mosley                         | Case number (if known)                           |   |
|------------------|--|---|--------------------------------|--|---|
|                  | First Name   | Middle Name   | Last Name                      |  |   |
| 31.              | Interests in insurance paramples: Health, disability |   | vings account (HSA); credit, I | nomeowner's, or renter's insurance               |   |
|                  | Yes. Name the insura of each policy and lis          | ance company  | npany name:                    | Beneficiary:                                     | Surrender or refund value:  |
| 32.              | If you are the beneficiary property because someon   |   |                                | cy, or are currently entitled to receive         |   |
|                  | Yes. Describe  |   |                                |  |   |
| 33.              |  | rties, whether or not you h<br>ployment disputes, insurance |                                | a demand for payment                             |   |
| 34.              | Other contingent and u                               | ınliquidated claims of every                                | nature, including counter      | claims of the debtor and rights                  |   |
|                  | No Yes. Describe                                     |   |                                |  |   |
| 35.              | Any financial assets you                             | u did not already list                                      |                                |  |   |
|                  | Yes. Describe  |   |                                |  |   |
| 36.              |  | all of your entries from Par<br>umber here                  |                                | or pages you have attached                       | \$2210.98   |
| Part             | 5: Describe Any Bu                                   | siness-Related Propert                                      | y You Own or Have an I         | nterest In. List any real estate in Part         | 1.  |
| 37.              | Do you own or have any                               | legal or equitable interes                                  | t in any business-related p    | roperty?   |   |
|                  | No. Go to Part 6. Yes. Go to line 38.                |   |                                | po<br>D  | urrent value of the ortion you own? o not deduct secured claims rexemptions |
| 38.              | Accounts receivable or                               | commissions you already                                     | earned                         |  |   |
|                  | No Yes. Describe                                     |   |                                |  |   |
| 39.              | Office equipment, furni<br>Examples: Business-relat  |   | dems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, electr | onic devices  |
|                  | ✓ No  Yes. Describe                                  |   |                                |  |   |
|                  |  |   |                                |  |   |

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| Deb      | tor 1 Nayshon                       | Т.   | Mosley                            | Case number (if known)            |                                       |
|----------|-------------------------------------|--|-----------------------------------|-----------------------------------|---------------------------------------|
| 40       | First Name                          | Middle Name  | Last Name                         | two do                            |                                       |
| 40.      |                                     | equipment, supplies you                              | use in business, and tools of yo  | our trade                         |                                       |
|          | <b>✓</b> No                         |  |                                   |                                   |                                       |
|          | Yes. Describe                       |  |                                   |                                   |                                       |
|          |                                     |  |                                   |                                   |                                       |
| 41.      | Inventory                           |  |                                   |                                   |                                       |
|          | - N                                 |  |                                   |                                   |                                       |
|          | Yes. Describe                       |  |                                   |                                   |                                       |
|          | les. Describe                       |  |                                   |                                   |                                       |
|          | -                                   |  |                                   |                                   |                                       |
| 42.      | Interests in partnersh              | nips or joint ventures                               |                                   |                                   |                                       |
|          | ✓ No                                |  |                                   |                                   |                                       |
|          | Yes. Give specific                  |  | Name of entity:                   | % of ownership:                   |                                       |
|          | information about                   |  |                                   |                                   |                                       |
|          | them                                |  |                                   |                                   | -                                     |
|          |                                     |  | =                                 |                                   |                                       |
|          |                                     |  | -                                 |                                   |                                       |
| 43.      | Customer lists, mailing             | g lists, or other compilat                           | tions                             |                                   |                                       |
|          | <b>✓</b> No                         |  |                                   |                                   |                                       |
|          | Yes. Do your lists i                | include personally identifia                         | ble information (as defined in 11 | U.S.C. § 101(41A))?               |                                       |
|          |                                     |  |                                   |                                   |                                       |
|          | No No Door                          | vrib o   |                                   |                                   |                                       |
|          | Yes. Desc                           | nbe  |                                   |                                   | <del></del> -                         |
| 44.      | Any business-related                | property you did not all                             | ready list                        | <u> </u>                          |                                       |
|          | <b>✓</b> No                         |  |                                   |                                   |                                       |
|          | Yes. Give specific                  |  |                                   |                                   | <del></del>                           |
|          | information                         |  |                                   |                                   |                                       |
|          |                                     |  |                                   |                                   |                                       |
|          |                                     |  |                                   |                                   | <del></del>                           |
|          |                                     |  |                                   |                                   | <u> </u>                              |
|          |                                     |  |                                   |                                   | <u> </u>                              |
|          |                                     |  |                                   |                                   |                                       |
|          |                                     |  |                                   |                                   | <del>_</del>                          |
| 45 A     | dd tho dollar value of              | all of your antrine from [                           | Part 5 including any entries for  | nages you have attached           |                                       |
|          |                                     |  | Part 5, including any entries for |                                   |                                       |
| <u> </u> |                                     |  |                                   | v •                               |                                       |
| Part     |                                     | arm- and Commerci<br>n interest in farmland, list it |                                   | y You Own or Have an Interest In. |                                       |
|          |                                     |  |                                   |                                   |                                       |
| 46.      | Do you own or have a                | any legal or equitable in                            | terest in any farm- or commerc    | sial fishing-related property?    |                                       |
|          | ✓ No. Go to Part 7.                 |  |                                   |                                   | Current value of the portion you own? |
|          | Yes. Go to line 47.                 |  |                                   |                                   | Do not deduct secured claims          |
|          | _                                   |  |                                   |                                   | or exemptions                         |
| 47.      | Farm animals Examples: Livestock, p | oultry farm-raised fish                              |                                   |                                   |                                       |
|          | <u> </u>                            | ounty, tarrit-taiseu tisti                           |                                   |                                   |                                       |
|          | No                                  |  |                                   |                                   |                                       |
|          | Yes. Describe                       |  |                                   |                                   |                                       |
|          |                                     |  |                                   |                                   |                                       |

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| Debt         | tor 1 Nayshon<br>First Name | T.<br>Middle Name                       | Mosley<br>Last Name      | Case number (if known)           |              |
|--------------|-----------------------------|---|--------------------------|----------------------------------|--------------|
| 48.          | Crops-either growing        | or harvested                            |                          |                                  |              |
|              | No Yes. Describe            |   |                          |                                  |              |
| 49.          | Farm and fishing equi       | pment, implements, machinery, fixtu     | ires, and tools of trade |                                  |              |
|              | <b>✓</b> No                 |   |                          |                                  |              |
|              | Yes. Describe               |   |                          |                                  |              |
| 50.          | Farm and fishing supp       | lies, chemicals, and feed               |                          |                                  |              |
|              | <b>✓</b> No                 |   |                          |                                  |              |
|              | Yes. Describe               |   |                          |                                  |              |
| 51.          | Any farm- and comme         | rcial fishing-related property you did  | d not already list       |                                  |              |
| 01.          | No                          | rolat holling rolated property you all  | a not an oddy not        |                                  |              |
|              | Yes. Describe               |   |                          |                                  |              |
|              |                             |   |                          |                                  |              |
|              |                             | II of your entries from Part 6, includi |                          | es you have attached             |              |
| <b>&gt;</b>  |                             |   |                          |                                  |              |
|              |                             |   |                          |                                  |              |
| Part         | 7: Describe All Pro         | perty You Own or Have an Inte           | rest in That You Did     | Not List Above                   |              |
|              | Do you have other pro       | perty of any kind you did not already   |                          |                                  |              |
|              |                             | s, country club membership              |                          |                                  |              |
|              | ✓ No  Yes. Give specific    |   |                          |                                  | ]            |
|              | information                 |   |                          |                                  |              |
|              |                             |   |                          |                                  |              |
| <b>54 A</b>  | dd Abo dollou walen of o    | II of commontation from Don't 7 White t |                          |                                  |              |
| 54. A        | ad the dollar value of a    | II of your entries from Part 7. Write t | nat number nere          |                                  | ,,           |
|              |                             |   |                          |                                  |              |
|              |                             |   |                          |                                  |              |
|              | _                           |   |                          |                                  |              |
| Part         | 8: List the Totals of       | f Each Part of this Form                |                          |                                  |              |
| 55. <b>F</b> | Part 1: Total real estate   | e, line 2                               |                          | <b>&gt;</b>                      |              |
| 56. <b>r</b> | oart 2 total vehicles, lin  | ne 5                                    | \$14325.00               |                                  |              |
| 57. <b>P</b> | art 3: Total personal a     | nd household items, line 15             | \$3950.00                | _                                |              |
| 58. <b>P</b> | art 4: Total financial as   | ssets, line 36                          | \$2210.98                | _                                |              |
| 59. <b>F</b> | Part 5: Total business-r    | elated property, line 45                |                          | _                                |              |
| 60. <b>F</b> | Part 6: Total farm- and     | fishing-related property, line 52       |                          |                                  |              |
| 61. <b>F</b> | Part 7: Total other prop    | erty not listed, line 54                |                          | <del>_</del>                     |              |
| 62.1         | Fotal personal property     | . Add lines 56 through 61               | \$20485.98               | — Copy personal property total ▶ | + \$20485.98 |
|              |                             |   |                          |                                  | \$20485.98   |
| 63. <b>T</b> | otal of all property on S   | Schedule A/B. Add line 55 + line 62     |                          |                                  |              |

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| Fill in this information to identify your case: |                           |             |                              |  |  |  |  |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1  | Nayshon                   | T.          | Mosley                       |  |  |  |  |
|   | First Name                | Middle Name | Last Name                    |  |  |  |  |
| Debtor 2  |                           |             |                              |  |  |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name                    |  |  |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois (State) |  |  |  |  |
| Case number<br>(If known)                       |                           |             | (State)                      |  |  |  |  |

### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa   | Identity the Property You Clair  | m as Exempt  |   |   |  |  |  |  |  |
|--|--|--|---|---|--|--|--|--|--|
| 1.   | , , , , , , , , , , , , , , , , , , ,  | •  |   |   |  |  |  |  |  |
|  | You are claiming state and federal   | You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) |   |   |  |  |  |  |  |
| You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) |  |  |   |   |  |  |  |  |  |
| 2.   | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. |  |   |   |  |  |  |  |  |
|  | Brief description of the property and line on Schedule A/B that lists this property                | Current value of<br>the portion you<br>own<br>Copy the value from<br>Schedule A/B  | Amount of the exemption you claim  Check only one box for each exemption.                           | Specific laws that allow exemption              |  |  |  |  |  |
|  | Brief description: Ford Edge, 2013 Line from Schedule A/B: 03                                      | \$14,325.00  | \$0  100% of fair market value, up to any applicable statutory limit                                | 735 ILCS 5/12-1001(c); 735 ILCS<br>5/12-1001(b) |  |  |  |  |  |
|  | Brief description: Checking account, Chase Line from Schedule A/B: 17                              | \$24.00  | \$24.00 100% of fair market value, up to any applicable statutory limit                             | 735 ILCS 5/12-1001(b)                           |  |  |  |  |  |
| 3.   | <b>✓</b> No  | ery 3 years after that for   | 375? cases filed on or after the date of adjustment.) rithin 1,215 days before you filed this case? |   |  |  |  |  |  |

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Debtor 1 Nayshon Τ. Mosley Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$0.00 description: V \$0 Savings account, Chase 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$0.00 description: \$0 Checking account, 100% of fair market value, up to any **United Credit Union** applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1006 Brief \$2,186.98 description: **V** \$2,186.98 Pension plan, AXA 100% of fair market value, up to any Equitable applicable statutory limit Line from Schedule A/B: 21 735 ILCS 5/12-1001(b) Brief \$400.00 description: \$400.00 Living Room Set, Couch, 100% of fair market value, up to any Bed applicable statutory limit Line from 06 Schedule A/B: Brief 735 ILCS 5/12-1001(b) \$2,500.00 description: \$2,500.00 **Wedding Ring** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$650.00 description: **✓** \$650.00 TV, Cell Phone, Laptop, 100% of fair market value, up to any Tablet

applicable statutory limit

applicable statutory limit

\$400.00

100% of fair market value, up to any

\$400.00

 $\overline{}$ 

Line from Schedule A/B:

description:

Line from

Schedule A/B:

**Used Clothing** 

11

Brief

735 ILCS 5/12-1001(a)

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|                               |  | Do   | cument Page 22 of   | 73  |   |                                       |
|-------------------------------|--|--|---|---|---|---------------------------------------|
| Fill in this                  | information to identify your ca  | ise:   |   |   |   |                                       |
| Debtor 1                      | Nayshon<br>First Name  | T.<br>Middle Name                                      | Mosley<br>Last Name   |   |   |                                       |
| Debtor 2<br>(Spouse, if t     | iling) First Name  | Middle Name  | Last Name   |   |   |                                       |
| United St                     | ates Bankruptcy Court for the:   | Northern   | District of Illinois (State)  |   |   |                                       |
| Case nur                      | nber   |  | (Otato)   |   |   |                                       |
| Offic                         | ial Form 106D  |  |   | -   |   | Check if this is an<br>amended filing |
| Sche                          | edule D: Credite   | ors Who Hav  | ve Claims Secure  | ed by Prop  | ertv  | 12/15                                 |
| more spa<br>name and<br>1. Do | ce is needed, copy the Addition to a see number (if known).  any creditors have claims so the No. Check this box and submitted Yes. Fill in all of the information | ecured by your propert<br>nit this form to the court v | e are filing together, both are equiber the entries, and attach it to to ty?  y?  yith your other schedules. You have | his form. On the top  | of any additional pag                                 |                                       |
| Part 1:                       | List All Secured Claims  |  |   |   |   |                                       |
| se<br>in                      | st all secured claims. If a credir<br>parately for each claim. If more the<br>Part 2. As much as possible, list<br>me.   | nan one creditor has a part                            | icular claim, list the other creditors  | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any     |
| Cre                           | ELLS FARGO DEALER SVC<br>editor's Name<br>O BOX 19657  | Describe the property                                  | that secures the claim:   | \$18,815.00   | \$14,325.00   | \$4,490.00                            |
| <u> </u>                      | Number Street  |  | the claim is: Check all that apply.   |   |   |                                       |
| Cit                           | VINE         CA         92623           y         State         ZIP Code           ho owes the debt?         Check one.  | Unliquidated Disputed                                  |   |   |   |                                       |
| \[ \sqrt{2}                   | T  | Nature of lien. Check a                                | ll that apply.  |   |   |                                       |
|                               | Debtor 2 only  Debtor 1 and Debtor 2 only  | An agreement you r car loan)                           | nade (such as mortgage or secured   |   |   |                                       |
|                               | At least one of the debtors and another  | Statutory lien (such  Judgment lien from               | as tax lien, mechanic's lien)<br>a lawsuit  |   |   |                                       |
|                               | Check if this claim relates to a community debt ate debt was 1/2016  | Other (including a rig                                 |   |   |   |                                       |
|                               | ite debt was 1/2016  | Last 4 digits of accour                                | nt number5812   |   |   |                                       |

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$18,815.00

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| Fill in t  | his inforn                                      | nation to identify your c  | ase:   |   |  |
|--|---|--|--|---|--|
| Debtor   | r 1   | Nayshon  | T.   | Mosley  |  |
|  |   | First Name   | Middle Name  | Last Name   |  |
| Debtor   |   | E: N   | A411 II A1   |   |  |
| (Spouse  | , ii iiiing)                                    | First Name   | Middle Name  | Last Name   |  |
| United   | States Ba                                       | ankruptcy Court for the:   | Northern   | District of Illinois  |  |
| C000 1   | number  |  |  | (State)   |  |
| (If known  |   |  |  |   | <del>-</del>   |
| Offic  | rial Fo   | orm 106E/F   |  |   | Check if this is an amended filing   |
|  |   |  |  |   |  |
| Sch  | nedu  | ıle E/F: Cre   | editors Who  | Have Unsecu   | ured Claims 12/15  |
| other p<br>Form 1<br>claims<br>the ent<br>known) | arty to a<br>06A/B) a<br>that are<br>ries in th | ny executory contract:<br>nd on Schedule G: Exe<br>listed in Schedule D: C<br>ne boxes on the left. At | s or unexpired leases that<br>ecutory Contracts and Une<br>Creditors Who Hold Claims | could result in a claim. Als<br>expired Leases (Official Form<br>Secured by Property. If mo | and Part 2 for creditors with NONPRIORITY claims. List the so list executory contracts on Schedule A/B: Property (Official rm 106G). Do not include any creditors with partially secured ore space is needed, copy the Part you need, fill it out, number of any additional pages, write your name and case number (if |
| 1. D   |   |  | secured claims against y   | ou?   |  |
| <u> </u>   |   |  |  |   |  |
|  | / No. G   | io to Part 2.  |  |   |  |
| 2. L   | Yes.  | io to Part 2.  |  |   |  |

Total

claim

Priority

amount

Nonpriority

amount

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| Debto   | r 1 Nayshon First Name   | T.<br>Middle Name                                  | Mosley<br>Last Name     | Case number (if known)   |   |
|---------|--|--|-------------------------|--|---|
| Part 9  | List All of Your NONPR   |  |                         |  |   |
| 3. D    | o any creditors have nonprior  | ity unsecured claims                               | against you?            | court with your other schedules.   |   |
| u<br>If | nsecured claim, list the creditor s  | separately for each claim                          | n. For each claim liste | of the creditor who holds each claim. If a creditor has mo<br>ed, identify what type of claim it is. Do not list claims already<br>rt 3.If you have more than four priority unsecured claims fill o  | included in Part 1.<br>out the Continuation |
|         | ATO ODEDIT   |  |                         |  | Total claim                                 |
| 4.1     | ATG CREDIT Nonpriority Creditor's Name   |  | La                      | ast 4 digits of account number 9190  | \$207.00                                    |
|         | 1700 W CORTLAND ST STE 2<br>Number Street  |  | w                       | hen was the debt incurred? 3/2015  |   |
|         | CHICAGO Illin City Star Who incurred the debt? Chec Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this claim relate Is the claim subject to offset                     | te Zip (k one.  / and another es to a community de | Code Ty                 | contingent Unliquidated Disputed  pe of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA  |   |
| 4.2     | CHASE CARD   |  | La                      | ast 4 digits of account number 8317  | \$785.00                                    |
|         | Nonpriority Creditor's Name<br>BANK ONE CARD SERV 2500   | WESTFIELD DRI                                      |                         | hen was the debt incurred? 7/2016  |   |
|         | Number Street  ELGIN Illin City Star  Who incurred the debt? Check  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors  Check if this claim relate Is the claim subject to offset | te Zip (k one.  / and another es to a community de | Code Ty                 | contingent Unliquidated Disputed  Contingent Unliquidated Unliquidate |   |
| 4.3     | City of Chicago EMS  Nonpriority Creditor's Name 33589 Treasury Center  Number Street  |  | w                       | s of the date you file, the claim is: Check all that apply.  Contingent  | \$1,084.00                                  |
|         | Chicago Illin City Star Who incurred the debt? Chec  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors  Check if this claim relate Is the claim subject to offset              | te Zip (k one.  / and another es to a community de | Code Ty                 | Unliquidated  Disputed  Di |   |

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Mosley Debtor 1 Nayshon Τ. Case number (if known) Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 ComEd \$162.89 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Center As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Past Due Is the claim subject to offset? **✓** No T Yes COMENITY BANK/NWYRK&CO \$987.00 2416 Last 4 digits of account number \_\_\_\_ Nonpriority Creditor's Name When was the debt incurred? 1/2015 220 W SCHROCK RD Number As of the date you file, the claim is: Check all that apply. Contingent WESTERVILLE 43081 Ohio Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts CreditCard Other. Specify \_ Is the claim subject to offset? **✓** No Yes Credit Box 4.6 \$197.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a P.O. Box 168 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60016 Des Plaines City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only  $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify \_\_\_

Pay Day Loans

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Mosley Debtor 1 Nayshon Τ. Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 FIRST PREMIER BANK \$721.00 2801 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 2/2017 Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent 56302 Saint Cloud Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ CreditCard Is the claim subject to offset? **✓** No Yes **FST PREMIER** \$450.00 Last 4 digits of account number 5721 Nonpriority Creditor's Name 900 W DÉLAWARE When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS South Dakota 57104 Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes Greentrust Loan 4.9 \$395.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 340 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Montana 59527 Hays City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only

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Mosley Debtor 1 Nayshon Τ. Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Lendgreen \$3,100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 221 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 54538 Lac Du Flambeau Wisconsin City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify \_\_\_ Pay Day Loan Is the claim subject to offset? **✓** No Yes Peoples Gas \$155.28 4.11 Last 4 digits of account number \_ Nonpriority Creditor's Name n/a 200 E. Randolph When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Past Due Other. Specify \_\_\_ Is the claim subject to offset? **✓** No Yes 4.12 Speedy Cash \$728.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1931 N. Mannheim Rd n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Melrose Park 60160 Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Past Due Is the claim subject to offset? **✓** No

Yes

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Τ. Mosley Debtor 1 Nayshon Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 SYNCB/LENSCRAFTERS \$259.00 Last 4 digits of account number \_ Nonpriority Creditor's Name C/O PO BOX 965036 When was the debt incurred? 12/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent ORLANDO 32896 Florida Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_\_\_ CreditCard Is the claim subject to offset? **✓** No Yes 4.14 Target Cash Now \$287.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 581 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 59527 Hays Montana City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Past Due ✓ Other. Specify \_\_\_\_\_ Is the claim subject to offset? **✓** No

Yes

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Mosley Last Name Debtor 1 Nayshon First Name T. Case number (if known) Middle Name

| Part 4: Add th  | Add the Amounts for Each Type of Unsecured Claim   |        |                  |  |  |  |  |  |
|---|--|--------|------------------|--|--|--|--|--|
| 5. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. |  |        |                  |  |  |  |  |  |
|   |  |        | Total claims     |  |  |  |  |  |
| Total claims from Part 1  | 6a. Domestic support obligations.  | 6a.    | a. \$0.00        |  |  |  |  |  |
| nom rait i  | Claims for death or personal injury while you were intoxicated      Other. Add all other priority unsecured claims. Write that amount here.  | 6b.    | <b>b.</b> \$0.00 |  |  |  |  |  |
|   |  | 6c.    | <b>c.</b> \$0.00 |  |  |  |  |  |
|   |  | 6d.    | \$0.00<br>d.     |  |  |  |  |  |
|   |  | \$0.00 |                  |  |  |  |  |  |
|   | , and the second |        |                  |  |  |  |  |  |
|   |  |        | Total claims     |  |  |  |  |  |
| Total claims from Part 2  | 6f. Student loans  | 6f.    | f. \$0.00        |  |  |  |  |  |
|   | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  6h. Debts to pension or profit-sharing plans, and other similar debts   |        | g. \$0.00        |  |  |  |  |  |
|   |  |        | h\$0.00          |  |  |  |  |  |
|   | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.   | 6i.    | i. \$9,518.17    |  |  |  |  |  |
|   | 6j. Total. Add lines 6f through 6i.  | 6j.    | j. \$9,518.17    |  |  |  |  |  |

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| Fill in this infor                      | mation to identify your ca | ase:        |                              |
|---|----------------------------|-------------|------------------------------|
| Debtor 1                                | Nayshon                    | T.          | Mosley                       |
|   | First Name                 | Middle Name | Last Name                    |
| Debtor 2                                |                            |             |                              |
| (Spouse, if filing)                     | First Name                 | Middle Name | Last Name                    |
| United States Bankruptcy Court for the: |                            | Northern    | District of Illinois (State) |
| Case number                             |                            |             | (Otato)                      |

### Official Form 106G

### Check if this is an amended filing

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or compan                             | ny with whom you have | the contract or lease | State what the contract or lease is for                                   |
|--|-----------------------|-----------------------|---|
| 2.1 Mavros, Gus<br>Name<br>15774 S. La Grang | e Rd.                 | ·                     | Residential Lease,<br>Debtor is Lessee,<br>Residential Year to Year Lease |
| Number                                       | Street                |                       |   |
| Orland Park                                  | Illinois              | 60462                 |   |
| City   | State                 | Zip Code              |   |

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|                                 |                           |  |                            | ,                |   |
|---------------------------------|---------------------------|--|----------------------------|------------------|---|
| Fill in this infor              | mation to identify your c | ase:   |                            |                  |   |
| Debtor 1                        | Nayshon                   | T.   | Mosley                     |                  |   |
|                                 | First Name                | Middle Name  | Last Name                  |                  |   |
| Debtor 2<br>(Spouse, if filing) | First Name                | Middle Name  | Last Name                  |                  |   |
| (ope acc, 11g)                  | rirst iname               | Middle Name  | Last Name                  |                  |   |
| United States E                 | Bankruptcy Court for the: | Northern   | District of Illinois       |                  |   |
| Case number                     |                           |  | (State)                    |                  |   |
| (If known)                      |                           |  |                            |                  |   |
|                                 |                           |  |                            |                  | Check if this is ar amended filing  |
| Official                        | Form 106H                 |  |                            |                  | amortada ming   |
| Official                        | 1 01111 10011             |  |                            |                  |   |
| Schedul                         | e H: Your Cod             | lebtors  |                            |                  | 12/15   |
| No Yes  Within the              | e last 8 years, have you  | u are filing a joint case, do  lived in a community pro ico, Puerto Rico, Texas, W | operty state or territor   | <b>y?</b> (Commu | .)  nity property states and territories include Arizona, California,   |
| ✓ No.                           | Go to line 3.             |  |                            | •                |   |
| Yes.                            | Did your spouse, forme    | r spouse, or legal equiva  | alent live with you at the | e time?          |   |
|                                 | No                        |  |                            |                  |   |
|                                 | Yes. In which communit    | y state or territory did yo  | u live?                    | Fill in          | the name and current address of that person.  |
|                                 | Name of your spouse, f    | ormer spouse, or legal equ   | uivalent                   |                  |   |
|                                 | Number Street             |  |                            |                  |   |
|                                 | City                      | State  | Zip C                      | Code             |   |
|                                 | - 9                       | Stato  | 0 0                        |                  |   |
|                                 | •                         | -  | •                          |                  | ouse is filing with you. List the person shown in line 2 ed the creditor on <i>Schedule D</i> (Official Form 106D), |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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|   |                |  |                       | 3.5               |                      |                                   |                       |
|---|----------------|--|-----------------------|-------------------|----------------------|-----------------------------------|-----------------------|
| Fill in this information                      | on to identify | your case:   |                       |                   |                      |                                   |                       |
| Debtor 1 Naysh                                | on             | T.   | Mosley                | <u>/</u>          |                      |                                   |                       |
| First N                                       | ame            | Middle Name  | Last N                | ame               | — Che                | eck if this is:                   |                       |
| Debtor 2<br>(Spouse, if filing) First N       |                | Middle Norse   | L ant N               | 0.000             | — I п                | An amended filing                 |                       |
|   |                | Middle Name  | Last N                |                   |                      | A supplement showing po           | et-notition chapter 1 |
| United States Bankrup the:                    | otcy Court for | Northern   | District of Illi      | nois<br>tate)     |                      | expenses as of the following      |                       |
| Case number                                   |                |  | (0                    | nato,             |                      |                                   |                       |
| (If known)                                    |                |  |                       |                   |                      | MM / DD / YYYY                    |                       |
| Official Forn                                 | n 106I         |  |                       |                   |                      |                                   |                       |
| Schedule I:                                   | Your Inc       | come   |                       |                   |                      |                                   | 12/1                  |
| spouse. If more space number (if known). I    | ce is needed,  | •  |                       |                   |                      |                                   | -                     |
| 1. Fill in your employ                        | yment          |  | Debtor 1              |                   |                      | Debtor 2                          |                       |
| information.                                  |                | Employment status  | <b>✓</b> Employed     |                   | Employed             |                                   |                       |
| If you have more the attach a separate pa     | •              |  |                       | nployed           |                      | Not Employed                      |                       |
| information about a                           | •              |  |                       |                   |                      |                                   |                       |
| employers.                                    |                | Occupation   |                       |                   |                      |                                   |                       |
| Include part time, s<br>self-employed work    |                | Employer's name  | Chicago S             | tate University   |                      |                                   |                       |
| Occupation may in                             | clude student  | Employer's address                                       |                       | th King Drive     |                      |                                   |                       |
| or homemaker, if it                           |                |  | Number Str            | eet               |                      | Number Street                     |                       |
|   |                |  |                       |                   |                      |                                   |                       |
|   |                |  | Chicago<br>City       | Illinois<br>State | 60628<br>Zip Code    | City St                           | ate Zip Code          |
|   |                | How long employed there?                                 |                       |                   | ·                    | ·                                 | ·                     |
|   |                |  |                       |                   |                      |                                   |                       |
| Part 2: Give Deta                             | ails About M   | Ionthly Income   |                       |                   |                      |                                   |                       |
| Estimate monthly in spouse unless you ar      |                | he date you file this form                               | <b>1.</b> If you have | nothing to re     | port for any line, v | write \$0 in the space. Inclu     | de your non-filing    |
| If you or your non-filir more space, attach a |                | e more than one employer, et to this form.               | combine the           | information f     | or all employers fo  |                                   | below. If you need    |
|   |                |  |                       | Fo                | or Debtor 1          | For Debtor 2 or non-filing spouse |                       |
|   |                | ary, and commissions (befor calculate what the monthly w |                       | 2.                | \$6,321.25           |                                   | •                     |
| 3. Estimate and lis                           | t monthly over | time nev   |                       | _                 |                      |                                   |                       |
|   | -              | time pay.  |                       | 3.                | + \$0.00             |                                   |                       |

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| Debtor 1 Nayshon                                  |   | Nosley              | Case number (if       |                                   |                      |
|---|---|---------------------|-----------------------|-----------------------------------|----------------------|
| First Name  | Middle Name L   | ast Name            | known) For Debtor 1   | For Debtor 2 or non-filing spouse |                      |
| Copy line 4 here                                  |   | → 4 =               | \$6,321.25            |                                   |                      |
| 5. List all payroll deduc                         | etions:   |                     |                       |                                   |                      |
| 5a. Tax, Medicare, a                              | nd Social Security deductions   | 5a.                 | \$665.99              |                                   |                      |
| 5b. Mandatory contr                               | ributions for retirement plans  | 5b.                 | \$0.00                |                                   |                      |
| 5c. Voluntary contrib                             | outions for retirement plans  | 5c.                 | \$0.00                |                                   |                      |
| 5d. Required repaym                               | nents of retirement fund loans  | 5d.                 | \$0.00                |                                   |                      |
| 5e. Insurance                                     |   | 5e.                 | \$498.88              |                                   |                      |
| 5f. Domestic support                              | t obligations   | 5f.                 | \$0.00                |                                   |                      |
| 5g. Union dues                                    |   | 5g.                 | \$0.00                |                                   |                      |
| 5h. Other deduction                               | s. Specify:   | 5h. +               | \$0.00 +              |                                   |                      |
| 6. Add the payroll dedu<br>+5h.                   | ctions. Add lines 5a + 5b + 5c + 5d + 5e +5f  | + 5g 6.             | \$1,164.87            |                                   |                      |
| 7. Calculate total mont                           | hly take-home pay. Subtract line 6 from line  | 4. 7.               | \$5,156.39            |                                   |                      |
| 8. List all other income                          | regularly received:   |                     |                       |                                   |                      |
| business, profess                                 | •   |                     |                       |                                   |                      |
|   | t for each property and business showing dinary and necessary business expenses, and net income.  | 8a.                 | \$0.00                |                                   |                      |
| 8b. Interest and divi                             | dends   | 8b.                 | \$0.00                |                                   |                      |
| 8c. Family support p<br>dependent regula          | ayments that you, a non-filing spouse, or a arly receive  | a                   |                       |                                   |                      |
|   | spousal support, child support, maintenance, and property settlement.   | 8c                  | \$0.00                |                                   |                      |
| 8d. Unemployment o                                | compensation  | 8d.                 | \$0.00                |                                   |                      |
| 8e. Social Security                               |   | 8e.                 | \$705.00              |                                   |                      |
| Include cash assist cash assistance the           | nt assistance that you regularly receive tance and the value (if known) of any nonat you receive, such as food stamps (benefits nental Nutrition Assistance Program) or | 8f.                 | \$0.00                |                                   |                      |
| 8g. Pension or retire                             | ement income  | 8g.                 | \$0.00                |                                   |                      |
| •   | ncome. Specify: Pro-Rated Tax Refund  | 8h. +               | \$300.00 +            |                                   |                      |
|   | Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +   | 8h. 9.              | \$1,005.00            |                                   |                      |
|   | <b>ncome.</b> Add line 7 + line 9.<br>10 for Debtor 1 and Debtor 2 or non-filing sp   | 10                  | \$6,161.39 +          | =                                 | \$6,161.39           |
| Include contributions friends or relatives.       | lar contributions to the expenses that you from an unmarried partner, members of your nounts already included in lines 2-10 or amou                                     | household, your d   | ependents, your roomm |                                   |                      |
| Specify:  |   |                     |                       | 11                                | . + \$0.00           |
|   | the last column of line 10 to the amount in<br>the Summary of Schedules and Statistical Sur   |                     |                       | ,                                 | \$6,161.39  Combined |
| 13. <b>Do you expect an in</b> No.  Yes. Explain: | crease or decrease within the year after y  | rou file this form? |                       |                                   | monthly income       |
|   |   |                     |                       |                                   |                      |

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|                                    |                                       | Docu   | ment Page 34 of 73                                  |                      |                         |                          |
|------------------------------------|---------------------------------------|--|---|----------------------|-------------------------|--------------------------|
| Fill in this infor                 | mation to identify                    | your case:   |   |                      |                         |                          |
| Debtor 1                           | Nayshon                               | T.   | Mosley  |                      |                         |                          |
| Debtor 2                           | First Name                            | Middle Name  | Last Name   | Check if this is:    |                         |                          |
| (Spouse, if filing)                | First Name                            | Middle Name  | Last Name   | An amended filir     | ng                      |                          |
| United States E                    | Bankruptcy Court for                  | or the: Northern [   | District of Illinois                                |                      | howing post-pet         | tition chapter 13<br>te: |
| Case number                        |                                       |  | (State)   |                      |                         |                          |
| (If known)                         |                                       |  |   | MM / DD / YYYY       | (                       |                          |
| Official                           | Form 100                              | 6 <u>J</u>   |   |                      |                         |                          |
| Schedul                            | e J: Your                             | Expenses   |   |                      |                         | 12/15                    |
| information. If (if known). Ans    |                                       |  |   |                      |                         | number                   |
| 1. Is this a joi                   | nt case?                              |  |   |                      |                         |                          |
| ✓ No. Go                           | to line 2                             |  |   |                      |                         |                          |
| Yes. D                             | oes Debtor 2 live                     | in a separate household?   |   |                      |                         |                          |
|                                    | No                                    |  |   |                      |                         |                          |
|                                    |                                       | must file Official Forms 106J-2, <i>Expen</i>                                  | ses for Separate Household of Debt                  | or 2.                |                         |                          |
|                                    | e dependents?                         | No   |   |                      |                         |                          |
| Do not list D<br>Debtor 2.         | eptor i and                           | Yes. Fill out this information for each dependent                              | Dependent's relationship to<br>Debtor 1 or Debtor 2 | Dependent's age      | Does depen<br>with you? | dent live                |
|                                    |                                       |  | Child   |                      | No.                     |                          |
| 2. Do warm ave                     |                                       |  |   |                      | ✓ Yes.                  |                          |
| expenses o                         | enses include<br>f people other       | <b>✓</b> No  |   |                      |                         |                          |
| than<br>yourself and<br>dependents | -                                     | Yes  |   |                      |                         |                          |
| _                                  |                                       | joing Monthly Expenses   |   |                      |                         |                          |
|                                    | _                                     |  | an are naine this form as a simple                  | amont in a Chantau 1 | 2 acce to repe          |                          |
|                                    | of a date after the                   | our bankruptcy filing date unless y<br>bankruptcy is filed. If this is a sup   |   |                      |                         |                          |
|                                    |                                       | non-cash government assistance i<br>uded it on <i>Schedule I: Your Incom</i> e |   |                      | Y                       | our expenses             |
|                                    | or home owners<br>or the ground or lo | ship expenses for your residence. In t. 4.                                     | clude first mortgage payments and                   |                      | 4.                      | \$1,650.00               |
| If not incl                        | uded in line 4:                       |  |   |                      |                         |                          |
| 4a. Real e                         | state taxes                           |  |   |                      | 4a                      | \$0.00                   |

\$75.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Nayshon T. Mosley Case number (if known)
First Name Middle Name Last Name

| First Name Wildername Last Name  |     |               |
|--|-----|---------------|
|  |     | Your expenses |
| 5. Additional mortgage payments for your residence, such as home equity loans  | 5.  | \$0.00        |
| 6. Utilities:  |     |               |
| 6a. Electricity, heat, natural gas   | 6a. | \$250.00      |
| 6b. Water, sewer, garbage collection   | 6b. | \$74.00       |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c. | \$215.00      |
| 6d. Other. Specify:  | 6d  | \$0.00        |
| 7. Food and housekeeping supplies  | 7.  | \$900.00      |
| 8. Childcare and children's education costs  | 8.  | \$175.00      |
| 9. Clothing, laundry, and dry cleaning   | 9.  | \$150.00      |
| 10. Personal care products and services  | 10. | \$150.00      |
| 11. Medical and dental expenses  | 11. | \$115.00      |
| 12. <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments                   | 12. | \$400.00      |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books   | 13. | \$0.00        |
| 14. Charitable contributions and religious donations   | 14. | \$415.00      |
| <ul><li>15. Insurance.</li><li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li></ul> |     |               |
| 15a. Life insurance  | 15a | \$95.00       |
| 15b. Health insurance  | 15b | \$0.00        |
| 15c. Vehicle insurance   | 15c | \$194.00      |
| 15d. Other insurance. Specify:   | 15d | \$0.00        |
| 16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.                            |     |               |
| Specify:   | 16  | \$0.00        |
| 17. Installment or lease payments:   | 10  |               |
| 17a. Car payments for Vehicle 1  | 17a | \$0.00        |
| 17b. Car payments for Vehicle 2  | 17b | \$0.00        |
| 17c. Other. Specify:   | 17c | \$0.00        |
| 17d. Other. Specify:   | 17d | \$0.00        |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from                        |     | \$0.00        |
| your pay on line 5, Schedule I, Your Income (Official Form 106I).  | 18. |               |
| 19.Other payments you make to support others who do not live with you.  Specify: Gym Membership                        | 40  | ***           |
| 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.               | 19. | \$20.00       |
| 20a. Mortgages on other property   | 20a | \$0.00        |
| 20b. Real estate taxes.  | 20b | \$0.00        |
| 20c. Property, homeowner's, or renter's insurance  | 20c | \$0.00        |
| 20d. Maintenance, repair, and upkeep expenses.   | 20d | \$0.00        |
| 20e. Homeowner's association or condominium dues   | 20e | \$0.00        |

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| Debtor 1 Naysh        |  | T.                  | Mosley      | Case number (if known) |     |             |
|-----------------------|--|---------------------|-------------|------------------------|-----|-------------|
| First N               | lame   | Middle Name         | Last Name   |                        |     |             |
| 21. <b>Other.</b> Spe | cify: SSI Offset, Pet Insura                           | ance and Care       |             |                        | 21  | \$723.00    |
| 22. Calculate         | your monthly expenses.                                 |                     |             |                        |     | \$5,601.00  |
| 22a. Add lir          | es 4 through 21.                                       |                     |             |                        |     | \$0.00      |
| 22b. Copy             | ine 22 (monthly expenses                               | 2                   |             | \$5,601.00             |     |             |
| 22c. Add lir          | e 22a and 22b. The result                              | is your monthly exp | enses.      |                        | 22. |             |
| 23. Calculate         | our monthly net income                                 |                     |             |                        |     |             |
| 23a. Copy             | ine 12 (your combined mo                               | onthly income) from | Schedule I. |                        | 23a | \$6,161.39  |
| 23b. Copy             | your monthly expenses fro                              | m line 22 above.    |             |                        | 23b | \$5,601.00  |
|                       | ct your monthly expenses                               |                     | ncome.      |                        |     | \$560.39    |
| The re                | sult is your monthly net in                            | come.               |             |                        | 23c | <del></del> |
|                       | le, do you expect to finish payment to increase or dec |                     |             |                        |     |             |

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| Fill in this information to identify your case: |            |             |                              |  |  |  |  |
|---|------------|-------------|------------------------------|--|--|--|--|
| Debtor 1  | Nayshon    | T.          | Mosley                       |  |  |  |  |
|   | First Name | Middle Name | Last Name                    |  |  |  |  |
| Debtor 2  |            |             |                              |  |  |  |  |
| (Spouse, if filing)                             | First Name | Middle Name | Last Name                    |  |  |  |  |
| United States Bankruptcy Court for the:         |            | Northern    | District of Illinois (State) |  |  |  |  |
| Case number                                     |            |             | (,                           |  |  |  |  |

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below  |   |  |
|-----|--|---|--|
|     | Did you pay or agree to pay someone who is NOT an attorney to h                                  | nelp you fill out bankruptcy forms?   |  |
|     | ✓ No   |   |  |
|     | Yes. Name of person  | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |
|     |  |   |  |
|     |  |   |  |
|     | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and   |  |
| ×   | /s/ Nayshon Mosley   | ×   |  |
|     | Signature of Debtor 1  | Signature of Debtor 2   |  |
|     | Date 8/11/2017   | Date  |  |
|     | MM/DD/YYYY   | MM/DD/YYYY  |  |

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| Fill in this in                | formation to identify your   | case:                  |                               |                 |                   |                     |                            |
|--------------------------------|--|------------------------|-------------------------------|-----------------|-------------------|---------------------|----------------------------|
| Debtor 1                       | Nayshon<br>First Name  | T.<br>Middle Na        | Mosley<br>ame Last Nam        | ie              | -                 |                     |                            |
| Debtor 2<br>(Spouse, if filing | g) First Name  | Middle Na              | ame Last Nam                  | ıe              | -                 |                     |                            |
| United State                   | es Bankruptcy Court for the:   | Northern               | District of Illino            | ois             | _                 |                     |                            |
| Case numb                      | er   |                        | (Sta                          | re)             | _                 |                     |                            |
| (If known)                     |  |                        |                               |                 |                   |                     | Check if this is a         |
| <u>Officia</u>                 | l Form 107   |                        |                               |                 |                   |                     | amended filing             |
| Statem                         | ent of Financia  | al Affairs fo          | r Individuals                 | Filing fo       | r Bankru          | ıptcy               | 04/10                      |
| information                    | olete and accurate as po<br>n. If more space is need<br>known). Answer every c | ed, attach a sepai     |                               |                 |                   |                     |                            |
|                                | ive Details About Your   | •                      | nd Where You Lived            | Before          |                   |                     |                            |
| 1. What                        | is your current marital st   | atus?                  |                               |                 |                   |                     |                            |
|                                | Married  |                        |                               |                 |                   |                     |                            |
| <u> </u>                       | Not married  |                        |                               |                 |                   |                     |                            |
| 2. Durin                       | ng the last 3 years, have y  | ou lived anywhere      | other than where you li       | ve now?         |                   |                     |                            |
| <b>✓</b> 1                     | No   |                        |                               |                 |                   |                     |                            |
|                                | es. List all of the places y   | ou lived in the last 3 | 3 years. Do not include       | where you live  | now.              |                     |                            |
| ι                              | Debtor 1:  |                        | Dates Debtor 1 lived there    | Debtor 2:       |                   |                     | Dates Debtor 2 lived there |
|                                |  |                        |                               | Same a          | as Debtor 1       |                     | Same as Debtor 1           |
| <u> </u>                       | Number Street  |                        | From                          | Number Sti      | eet               |                     | From                       |
| _                              |  |                        | То                            |                 |                   |                     | То                         |
| 7                              | City State   | Zip Code               |                               | City            | State             | Zip Code            |                            |
|                                | Jity State   | Zip Code               |                               |                 | as Debtor 1       | Zip Code            | Same as Debtor 1           |
|                                |  |                        |                               |                 |                   |                     |                            |
| 1                              | Number Street  |                        | From                          | Number Sti      | reet              |                     | From                       |
| -                              |  |                        | То                            |                 |                   |                     | То                         |
| ā                              | City State   | Zip Code               |                               | City            | State             | Zip Code            |                            |
|                                | the last 8 years, did you e  |                        |                               |                 |                   |                     |                            |
|                                | ,  | omia, radito, Louisia  | ara, receasa, receiving and a | , , aono moo, 1 | ondo, vradilligit | ,, and 111300113111 | •1                         |
|                                | s. Make sure you fill out S  | Schedule H: Your C     | odebtors (Official Form       | 106H).          |                   |                     |                            |

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| Debte         | or 1                | Nayshon T.  | Mosley   |  | number (if known)                                      |  |
|---------------|---------------------|---|--|--|--|--|
|               |                     |   | e Name Last Na   | me   |  |  |
| Part          | 2:                  | Explain the Sources of Your Inc   | come   |  |  |  |
| ı             | Fill i              | you have any income from employm<br>n the total amount of income you receivities. If you are filing a joint case and you<br>No<br>Yes. Fill in the details.   | ved from all jobs and all bus  | inesses, including part-time   |  | irs?   |
|               |                     |   | Debtor 1   |  | Debtor 2   |  |
|               |                     |   | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)                                      | Sources of income<br>Check all that apply.             | Gross income<br>(before deductions and<br>exclusions)            |
|               |                     | om January 1 of current year until<br>e date you filed for bankruptcy:  | Wages, commissions, bonuses, tips  ☐ Operating a business                              | \$40845.00   | Wages, commissions, bonuses, tips Operating a business |  |
|               |                     | or last calendar year: anuary 1 to December 31, 2016 ) YYYY   | Wages, commissions, bonuses, tips Operating a business                                 | \$70000.00   | Wages, commissions, bonuses, tips Operating a business |  |
|               |                     | or the calendar year before that:<br>anuary 1 to December 31, 2015 )<br>YYYY  | Wages, commissions, bonuses, tips Operating a business                                 | \$66000.00   | Wages, commissions, bonuses, tips Operating a business |  |
| lı<br>p<br>fi | nclu<br>ubl<br>ling | you receive any other income during the income regardless of whether that in ic benefit payments; pensions; rental in a joint case and you have income that each source and the gross income from No  Yes. Fill in the details. | ncome is taxable. Examples come; interest; dividends; m you received together, list it | of other income are alimony;<br>noney collected from lawsuits<br>only once under Debtor 1. | s; royalties; and gambling and lot                     | · ·  |
|               |                     |   | Debtor 1   |  | Debtor 2   |  |
|               |                     |   | Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions)                           | Sources of income<br>Describe below.                   | Gross income from each source (before deductions and exclusions) |
|               |                     | rom January 1 of current year until<br>he date you filed for bankruptcy:  | 2017 SSI YTD   | \$4,935.00   |  |  |
|               |                     | or last calendar year: January 1 to December 31, 2016 ) YYYY  | 2016 SSI   | \$8,460.00   |  |  |
|               |                     | or the calendar year before that: January 1 to December 31, 2015 YYYY   | 2015 SSI   | \$8,436.00   |  |  |
|               |                     |   |  |  |  |  |

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Mosley Debtor 1 Nayshon Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general part corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any reagent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support of such as child support and alimony.  No  Yes. List all payments to an insider.  Dates of Total amount Amount you still owe | ner;<br>managing    |
|---|---------------------|
| Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general part corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support of such as child support and alimony.  No  Yes. List all payments to an insider.  Dates of  Total amount  Amount you  Reason for this payments.  | ner;<br>managing    |
| Yes. List all payments to an insider.  Dates of Total amount Amount you Reason for this p   |                     |
| Dates of Total amount Amount you Reason for this p  |                     |
|   | ayment              |
| Insider's Name  |                     |
| Number Street   |                     |
| City State Zip Code   |                     |
| Insider's Name  |                     |
| Number Street   |                     |
| City State Zip Code   |                     |
| Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt insider? Include payments on debts guaranteed or cosigned by an insider.  No   | t that benefited an |
| Yes. List all payments that benefited an insider.   |                     |
| Dates of payment paid Still owe Reason for this payment paid Still owe  | ·                   |
| Insider's Name  | mane                |
| Number Street   |                     |
|   |                     |
| City State Zip Code   |                     |
| Insider's Name  |                     |
| Number Street   |                     |
|   |                     |

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Mosley Debtor 1 Nayshon Case number (if known) Middle Name First Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No ◪ Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Nayshon First Name | T.<br>Middle Name            | Mosley<br>Last Name           | Case number (if known)                        |                        |
|------|--------------------------|------------------------------|-------------------------------|---|------------------------|
| 11.  | Within 90 days before y  | ou filed for bankruptcy, did | d any creditor, including a l | pank or financial institution, set off any am | nounts from your       |
|      | accounts or refuse to m  | nake a payment because y     | ou owed a debt?               |   |                        |
|      | No No                    | 1-                           |                               |   |                        |
|      | Yes. Fill in the detail  | IS.                          |                               |   |                        |
|      |                          |                              | Describe the action th        | e creditor took  Date action was taken        | Amount                 |
|      | Creditor's Name          |                              | -                             |   |                        |
|      | November Charact         |                              | _                             |   |                        |
|      | Number Street            |                              | Last 4 digits of account      | number VVVV                                   |                        |
|      |                          |                              | _ Last 4 digits of account    | number. XXX-                                  |                        |
|      | City S                   | State Zip Code               | -                             |   |                        |
| 12.  |                          |                              |                               | possession of an assignee for the benefit     | of creditors, a court- |
|      | appointed receiver, a cu | ustodian, or another officia | 11?                           |   |                        |
|      | ✓ No                     |                              |                               |   |                        |
|      | Yes                      |                              |                               |   |                        |
| Part | List Certain Gifts       | and Contributions            |                               |   |                        |
| 13.  | Within 2 years before y  | ou filed for bankruptcy, die | d you give any gifts with a t | otal value of more than \$600 per person?     |                        |
|      | <b>√</b> No              |                              |                               |   |                        |
|      | Yes. Fill in the deta    | ils for each gift.           |                               |   |                        |
|      | Gifts with a total va    | alue of more than \$600      | Describe the gifts            | Dates you gave the gifts                      | Value                  |
|      |                          |                              |                               |   | _                      |
|      | Person to Whom You       | u Gave the Gift              | -                             |   |                        |
|      | _                        |                              | -                             |   |                        |
|      | Number Street            |                              | -                             |   |                        |
|      | City                     | State Zip Code               | -                             |   |                        |
|      | Person's relationship    | to you                       |                               |   |                        |
|      |                          | _                            |                               |   |                        |
|      | Person to Whom You       | u Gave the Gift              | -                             |   |                        |
|      | _                        |                              | -                             |   |                        |
|      | Number Street            |                              | -                             |   |                        |
|      | City                     | State Zip Code               | -                             |   |                        |
|      | Person's relationship    | to you                       |                               |   |                        |

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| Jeblor I     | Nayshon  | T.   | Mosley                                       | ase number (if known) |                          |                   |
|--------------|--|--|--|-----------------------|--------------------------|-------------------|
|              | First Name   | Middle Name                                | Last Name                                    |                       |                          |                   |
|              |  |  |  |                       |                          |                   |
| 4. Wit       | thin 2 years before you file   | d for bankruptcy, did                      | you give any gifts or contributions w        | ith a total value of  | more than \$600          | to any charity?   |
|              | l No   |  |  |                       |                          |                   |
| ✓            | No   |  |  |                       |                          |                   |
|              | Yes. Fill in the details for $\epsilon$  | each gift or contributi                    | on.  |                       |                          |                   |
|              | Gifts or contributions to  | charities                                  | Describe what you contributed                |                       | Date you                 | Value             |
|              | that total more than \$60  |  | Describe what you contributed                |                       | contributed              | Value             |
|              | that total more than 400   | •  |  |                       | Contributed              |                   |
|              |  |  |  |                       |                          |                   |
|              | Charity's Name   |  | -  |                       |                          |                   |
|              | -  |  |  |                       |                          |                   |
|              |  |  | -  |                       |                          |                   |
|              | Normalia are Otropat   |  | -  |                       |                          |                   |
|              | Number Street  |  |  |                       |                          |                   |
|              | -  |  | -  |                       |                          |                   |
|              | City State   | Zip Code                                   |  |                       |                          |                   |
|              | 1  |  |  |                       |                          |                   |
| rt 6:        | List Certain Losses  |  |  |                       |                          |                   |
| gar<br>✓     | mbling?<br>  No<br>  Yes. Fill in the details.   |  |  |                       |                          |                   |
|              | Describe the property yo   | u lost and                                 | Describe any insurance coverage              | e for the loss        | Date of your             | Value of property |
|              | how the loss occurred  |  | Include the amount that insurance            | has paid. List        | loss                     | lost              |
|              |  |  | pending insurance claims on line 3           | 3 of Schedule         |                          |                   |
|              |  |  | A/B: Property.                               |                       |                          |                   |
|              |  |  |  |                       |                          |                   |
|              |  |  |  |                       |                          |                   |
| w+ 7.        | List Certain Payments  | or Transfers                               |  |                       |                          |                   |
|              | , , ,  |  | n credit courrelling agencies for services   |                       |                          |                   |
| $\checkmark$ | No   |  | or credit counseling agencies for services   |                       |                          |                   |
|              | No Yes. Fill in the details.   |  | in credit courtselling agencies for services |                       |                          |                   |
|              |  |  | Description and value of any pro             | perty                 | Date payment             | Amount of         |
|              |  |  |  | perty                 | Date payment or transfer | Amount of payment |
|              |  |  | Description and value of any pro             | perty                 |                          |                   |
|              | Yes. Fill in the details.  |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm   |  | Description and value of any pro             | perty                 | or transfer              |                   |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue   |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid   |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue   |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street   |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois   | 60643                                      | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street   |  | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue  Number Street  Chicago Illinois  City State   | 60643                                      | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois   | 60643                                      | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm  Person Who Was Paid 11101 S. Western Avenue  Number Street  Chicago Illinois  City State   | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Pay   | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay  Person Who Was Paid                           | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address  Person Who Made the Pay   | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay  Person Who Was Paid                           | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay  Person Who Was Paid                           | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid  Number Street             | 60643<br>Zip Code<br>ment, if Not You      | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay  Person Who Was Paid                           | 60643<br>Zip Code                          | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid  Number Street  City State | 60643<br>Zip Code<br>ment, if Not You      | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid  Number Street             | 60643<br>Zip Code<br>ment, if Not You      | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |
|              | Yes. Fill in the details.  Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street  Chicago Illinois City State  Email or website address Person Who Made the Pay Person Who Was Paid  Number Street  City State | 60643 Zip Code  ment, if Not You  Zip Code | Description and value of any pro transferred | perty                 | or transfer<br>was made  | payment           |

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| Debto |                     | Nayshon   | T.   | Mosley   | Case number    | (if known)  |                                  |
|-------|---------------------|---|--|--|----------------|---|----------------------------------|
|       |                     | First Name  | Middle Name                                    | Last Name                                      |                |   |                                  |
| I     | help                | hin 1 year before you filed for<br>o you deal with your creditors<br>not include any payment or trans | or to make paymer                              |  | ehalf pay or t | ransfer any property to a                                   | nyone who promised to            |
|       | <b>✓</b>            | No<br>Yes. Fill in the details.   |  |  |                |   |                                  |
|       |                     | Too. Tim it als docume.   |  | Description and value of any pr<br>transferred | operty         | Date payment or transfer was made                           | Amount of payment                |
|       |                     | Person Who Was Paid   |  |  |                |   |                                  |
|       |                     | Number Street   |  |  |                |   |                                  |
|       |                     |   |  |  |                |   |                                  |
|       |                     | City State  | Zip Code                                       |  |                |   |                                  |
| †     | <b>the</b><br>Incli | ordinary course of your busing ude both outright transfers and the transfers that you have already I  | ess or financial affa<br>transfers made as sec | curity (such as the granting of a secu         |                |   |                                  |
|       |                     | Yes. Fill in the details.   |  | Beer felter and all a charge                   | . 5            |   | D. I.                            |
|       |                     |   |  | Description and value of proper transferred    | paym           | ribe any property or<br>ents received or debts pa<br>change | Date<br>aid transfer was<br>made |
|       |                     | Person Who Received Transfer  |  |  |                |   |                                  |
|       |                     | Number Street   |  |  |                |   |                                  |
|       |                     | City State<br>Person's relationship to you  | Zip Code                                       |  |                |   |                                  |
|       |                     | Person Who Received Transfer  |  |  |                |   |                                  |
|       |                     | Number Street   |  |  |                |   |                                  |
|       |                     | City State<br>Person's relationship to you  | Zip Code                                       |  |                |   |                                  |
| ļ     | ben                 | hin 10 years before you filed for eficiary? ese are often called asset-protect                        |  | you transfer any property to a self            | -settled trus  | or similar device of whic                                   | ch you are a                     |
|       | `<br>✓              | No  | ,  |  |                |   |                                  |
|       | Ш                   | Yes. Fill in the details.   |  | Description and value of the p                 | roperty trans  | sferred   | Date<br>transfer was<br>made     |
|       |                     | Name of trust   |  |  |                |   |                                  |

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Mosley Debtor 1 Nayshon \_ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Mosley Debtor 1 Nayshon \_\_ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt |          | Nayshon                    |                                   | T.                 | Mosley   | Case nu               | umber <i>(if k</i> | nown)        |                                     |                    |
|------|----------|----------------------------|-----------------------------------|--------------------|--|-----------------------|--------------------|--------------|-------------------------------------|--------------------|
|      |          | First Name                 |                                   | Middle Name        | Last Name  |                       |                    |              |                                     |                    |
| 26.  | Hav      | e you been a part          | y in any judio                    | cial or administ   | trative proceeding under   | r any environmental   | law? Inc           | lude settlem | ents and orde                       | rs.                |
|      | П        | Yes. Fill in the det       | tails.                            |                    |  |                       |                    |              |                                     |                    |
|      | Ч        |                            |                                   |                    | Court or agency  | ı                     | Nature of          | the case     |                                     | Status of the case |
|      |          | Case title                 |                                   |                    |  |                       |                    |              |                                     | Pending            |
|      |          |                            |                                   |                    | Court Name   |                       |                    |              |                                     | On appeal          |
|      |          | Case number                |                                   |                    | NumberStreet   |                       |                    |              |                                     | Concluded          |
|      |          | 1                          |                                   |                    | City State   | Zip Code              |                    |              |                                     | _                  |
| Part | 11:      | Give Details Al            | oout Your E                       | Business or C      | onnections to Any Bu   | ısiness               |                    |              |                                     |                    |
| 27.  | Witl     | nin 4 years before         | you filed for                     | bankruptcy, di     | d you own a business or  | have any of the follo | owing co           | nnections to | any business                        | ?                  |
|      |          | A member of A partner in a | f a limited lial<br>a partnership | bility company (   | rade, profession, or othe<br>(LLC) or limited liability pa<br>ive of a corporation | =                     | ime or pa          | art-time     |                                     |                    |
|      |          | _                          |                                   |                    | equity securities of a cor   | noration              |                    |              |                                     |                    |
|      |          |                            | at loadt 0 /0 t                   | or the voting or   | equity seeds lifes of a col  | poration              |                    |              |                                     |                    |
|      | <b>✓</b> | No. None of the a          | above applie                      | s. Go to Part 12   | 2.   |                       |                    |              |                                     |                    |
|      |          | Yes. Check all that        | at apply abo                      | ve and fill in the | e details below for each l   | ousiness.             |                    |              |                                     |                    |
|      |          |                            |                                   |                    | Describe the nat   | ure of the business   |                    |              | lentification notial Security no    |                    |
|      |          | Business Name              |                                   |                    |  |                       |                    | EIN:         |                                     |                    |
|      |          | Number Street              |                                   |                    | _  |                       |                    | Dates busin  | ess existed                         |                    |
|      |          | City                       | State                             | Zip Code           | Name of account  | ant or bookkeeper     |                    | From         | То                                  |                    |
|      |          |                            |                                   |                    |  |                       |                    |              |                                     |                    |
|      |          |                            |                                   |                    | Describe the nat   | ure of the business   |                    |              | lentification notical Security no   |                    |
|      |          | Business Name              |                                   |                    |  |                       |                    | EIN:         |                                     |                    |
|      |          | Number Street              |                                   |                    | — Name of account  |                       |                    | Dates busin  | ess existed                         |                    |
|      |          | City                       | State                             | Zip Code           | Name of account  | ant or bookkeeper     |                    | _            | _                                   |                    |
|      |          | Oity                       | State                             | Zip Gode           |  |                       |                    | From         | То                                  |                    |
|      |          |                            |                                   |                    | Describe the nat   | ure of the business   |                    |              | lentification no<br>ial Security no |                    |
|      |          | Business Name              |                                   |                    |  |                       |                    | EIN:         |                                     |                    |
|      |          | Number Street              |                                   |                    | Name of account  | ant or bookkeeper     |                    | Dates busin  | ess existed                         |                    |
|      |          | City                       | State                             | Zip Code           |  |                       |                    | From         | To                                  |                    |
|      |          |                            |                                   |                    |  |                       |                    |              |                                     |                    |

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| Deb  | tor 1 Nayshon    |                                    | T.                    | Mosley                         | Case number (if known)   |
|------|------------------|------------------------------------|-----------------------|--------------------------------|--|
|      | First Name       |                                    | Middle Name           | Last Name                      |  |
| 28.  | creditors, or o  | other parties.                     |                       | ou give a financial statemo    | ent to anyone about your business? Include all financial institutions,   |
|      | Yes. Fill in     | the details below                  | •                     |                                |  |
|      |                  |                                    |                       | Date issued                    |  |
|      | Name             |                                    |                       | MM/DD/YYYY                     |  |
|      |                  |                                    |                       |                                |  |
|      | Number           | Street                             |                       | _                              |  |
|      | City             | State                              | Zip Code              | _                              |  |
| Part | 12: Sign Be      | <b>.</b>                           |                       |                                |  |
|      |                  | ase can result in f                | ines up to \$250,000, |                                | rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
|      |                  | /s/ Nayshon N<br>Signature of Debt |                       |                                | Signature of Debtor 2  |
|      |                  | J                                  |                       |                                | Date   |
| ı    | Did you attach   | Date 8/11/2017 additional pages t  | o Your Statement o    | f Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)?   |
| [    | <b>✓</b> No      |                                    |                       |                                |  |
|      | Yes              |                                    |                       |                                |  |
| ı    | Did you pay or a | agree to pay some                  | one who is not an a   | ttorney to help you fill out   | bankruptcy forms?  |
| [    | <b>✓</b> No      |                                    |                       |                                |  |
|      | Yes. Name        | of person                          |                       |                                | Attach the Bankruptcy Petition Preparer's Notice,  |

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B2030 (Form 2030) (12/15)

### **UNITED STATES BANKRUPTCY COURT**

|     |  | Northern               | District of Illinois        |                    |                              |
|-----|--|------------------------|-----------------------------|--------------------|------------------------------|
| re_ | Nayshon T. Mosley  |                        |                             | Case No.           |                              |
|     | Debtor   |                        |                             |                    | (If known)                   |
|     |  |                        |                             | Chapter            | Chapter 13                   |
|     | DISCLOSURE OF  | COMPENSA               | ATION OF ATT                | ORNEY F            | OR DEBTOR                    |
| 1   | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing | g of the petition in bankru | ptcy, or agreed to | be paid to me, for services  |
|     | For legal services, I have agreed to ac  | cept                   |                             |                    | \$4,000.00                   |
|     | Prior to the filing of this statement I h  | nave received          |                             |                    | \$0.00                       |
|     | Balance Due  |                        |                             |                    | \$4,000.00                   |
| 2   | . The source of the compensation paid  | I to me was:           |                             |                    |                              |
|     | <b>✓</b> Debtor  | Other (                | (specify)                   |                    |                              |
| 3   | . The source of the compensation paid  | I to me is:            |                             |                    |                              |
|     | <b>✓</b> Debtor  | Other (                | (specify)                   |                    |                              |
| 4   | I have not agreed to share the ab members and associates of my la  |                        | pensation with any other p  | erson unless the   | ey are                       |
|     | I have agreed to share the above members or associates of my law the people sharing in the compe               | firm. A copy of the    | agreement, together with    |                    |                              |
| 5   | . In return for the above-disclosed fee,<br>a. Analysis of the debtor's finan<br>bankruptcy;                   | _                      | - ·                         |                    | • •                          |
|     | b. Preparation and filing of any   | petition, schedules,   | statements of affairs and   | plan which may b   | pe required;                 |
|     | c. Representation of the debtor  | at the meeting of cre  | editors and confirmation h  | nearing, and any a | adjourned hearings thereof;  |
|     | d. Representation of the debtor  | in adversary proceed   | dings and other contested   | l bankruptcy mat   | ters;                        |
| 6   | . By agreement with the debtor(s), the   | above-disclosed fee    | does not include the follo  | owing services:    |                              |
|     |  |                        |                             |                    |                              |
|     |  | CE                     | ERTIFICATION                |                    |                              |
|     | certify that the foregoing is a complet tor(s) in this bankruptcy proceedings.                                 | e statement of any a   | agreement or arrangement    | for payment to n   | ne for representation of the |
|     | 8/11/2017  |                        | /s/ Ron                     | ak Y Shah          |                              |
|     | Date   |                        | Signature                   | of Attorney        |                              |
|     |  |                        | Semrad                      | Law Firm           |                              |
|     |  |                        |                             | of law firm        |                              |

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$61.76 for expenses, leaving a balance due of \$4,371.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date:    | 8/11/2017   |                        |
|----------|-------------|------------------------|
| Signed:  |             |                        |
| /s/ Nays | shon Mosley |                        |
|          |             | /s/ Ronak Y Shah       |
| Debtor(s | 5)          | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### **Chapter 7: Liquidation**

|   | \$245 | filing fee         |
|---|-------|--------------------|
|   | \$75  | administrative fee |
| + | \$15  | trustee surcharge  |
|   | \$335 | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### Chapter 11: Reorganization

|   | \$1,167 | filing fee         |
|---|---------|--------------------|
| + | \$550   | administrative fee |
|   | \$1,717 | total fee          |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to:
<a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a>
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

| In re:          | Mosley, Nayshon T. | Case No.   | Case No                              |  |  |
|-----------------|--------------------|--|--------------------------------------|--|--|
|                 | Debtor(s)          |  |                                      |  |  |
|                 |                    | Chapter.   | Chapter13                            |  |  |
|                 | VERIFI             | CATION OF CREDITOR MAT                                 | TRIX                                 |  |  |
| Ti<br>knowledge |                    | fy that the attached list of creditors is tr           | rue and correct to the best of their |  |  |
| Date:           | 8/11/2017          | /s/ Mosley, Nays<br>Mosley, Naysho<br>Signature of Del | n T.                                 |  |  |

WELLS FARGO DEALER SVC PO BOX 19657 IRVINE, CA, 92623

COMENITY BANK/NWYRK&CO 220 W SCHROCK RD WESTERVILLE, OH, 43081

CHASE CARD BANK ONE CARD SERV 2500 WESTFIELD DRI ELGIN, IL, 60124

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

FST PREMIER 900 W DELAWARE SIOUX FALLS, SD, 57104

SYNCB/LENSCRAFTERS C/O PO BOX 965036 ORLANDO, FL, 32896

ATG CREDIT 1700 W CORTLAND ST STE 2 CHICAGO, IL, 60622

City of Chicago EMS 33589 Treasury Center Chicago, IL, 60694

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, IL, 60181

Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

Lendgreen P.O. Box 221 Lac Du Flambeau, WI, 54538

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Greentrust Loan Po Box 340 Hays, MT, 59527

Credit Box P.O. Box 168 Des Plaines, IL, 60016

Target Cash Now PO Box 581 Hays, MT, 59527

Speedy Cash Po Box 782648 Wichita, KS, 67278

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filling, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$61.76 for expenses, leaving a balance due of \$4,371.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Debtor(s | s)                           | Attorney for Debtor(s) |  |
|----------|------------------------------|------------------------|--|
|          | <i>J</i>                     | /s/ Ronak Y Shah       |  |
| /s/ Nays | shon Mosley Rappuen / Maskaj |                        |  |
| Signed:  | $\frac{1}{2}$                |                        |  |
| Date:    | 8/11/2017                    |                        |  |

Do not sign if the fee amounts at top of this page are blank.

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| Debtor 1 Nayshon<br>First Name   |  | Mosley<br>Last Name   | Case number (if known)  |                                 |  |
|--|--|---|---|---------------------------------|--|
|  | restions for Reporting Purposes  |   |   |                                 |  |
| 16. What kind of debts do<br>you have?   | 16a. Are your debts primarily "incurred by an individual No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily   | consumer debts? Con<br>I primarily for a personal<br>business debts? Busin<br>Investment or through the | nsumer debts are defined in 11 U.S.C. § 101(8) I, family, or household purpose."  ness debts are debts that you incurred to obtain the operation of the business or investment.  sumer debts or business debts. |                                 |  |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  | expenses are paid that fi  | 7. Do you estimate that a   | fter any exempt property is excluded and administi<br>istribute to unsecured creditors?   | rative                          |  |
| 18. How many creditors<br>do you estimate that<br>you owe?   | ✓ 1-49<br>☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 1,000-5,000<br>5,001-10,000<br>10,001-25,00   | Section 1   |                                 |  |
| 19. How much do you estimate your assets to be worth?  |  | \$1,000,001-\$<br>\$10,000,001-<br>\$50,000,001-<br>\$100,000,000                                       | \$50 million \$1,000,000,001-\$10 k   | billion                         |  |
| 20. How much do you estimate your liabilities to be?   | ✓ \$0-\$50,000  ☐ \$50,001-\$100,000  ☐ \$100,001-\$500,000  ☐ \$500,001-\$1 million   | \$1,000,001-\$ \$10,000,001- \$50,000,001-  | \$50 million \$1,000,000,001-\$10 k   | billion                         |  |
| Part 7: Sign Below   | 116  |   |   |                                 |  |
| I have examined this petition, and I declare under penalty of perjury that the information provided is true a correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proce under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). |  |   |   | ,12, or 13<br>roceed<br>me fill |  |
|  | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |   |   |                                 |  |
|  | /s/ Nayshon Mosley / / / Signature of Debtor 1   | ywx7 mezlen   | Signature of Debtor 2   |                                 |  |
|  | Executed on 8/11/2017 MM / DD  |   | Executed onMM / DD / YYYY   |                                 |  |

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| Fill in this information to identify your case: |                           |             |                      |  |  |
|---|---------------------------|-------------|----------------------|--|--|
| Debtor 1  | Nayshon                   | T.          | Mosley               |  |  |
|   | First Name                | Middle Name | Last Name            |  |  |
| Debtor 2  |                           |             |                      |  |  |
| (Spouse, if filing)                             | First Name                | Middle Name | Last Name            |  |  |
| United States E                                 | Bankruptcy Court for the: | Northern    | District of Illinois |  |  |
| Casa aumahar                                    |                           |             | (State)              |  |  |
| Case number<br>(If known)                       |                           |             |                      |  |  |

### Official Form 106Dec

### Check if this is an amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Part 1:            | Sign Below  |   |  |  |  |  |
|--------------------|---|---|--|--|--|--|
| Dic                | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? |   |  |  |  |  |
| V                  | No  |   |  |  |  |  |
|                    | Yes. Name of person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |  |  |  |  |
|                    |   |   |  |  |  |  |
|                    |   |   |  |  |  |  |
|                    | der penalty of perjury, I declare that I have read the summary a it they are true and correct.    | nd schedules filed with this declaration and  |  |  |  |  |
| <b>X</b> /s        | Nayshon Mosley Haraken & Market   | ×   |  |  |  |  |
| Sigr               | nature of Debtor 1  | Signature of Debtor 2   |  |  |  |  |
| Date               | e 8/11/2017   | Date  |  |  |  |  |
| lander of the same | MM/DD/YYYY  | MM/DD/YYYY  |  |  |  |  |

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| Debtor 1      | Nayshon  | Т.                                    | Mosley                      | Case number (if known)  |
|---------------|--|---------------------------------------|-----------------------------|---|
|               | First Name   | Middle Name                           | Last Name                   |   |
| 28. With cree | thin 2 years before yeditors, or other part<br>No<br>Yes. Fill in the deta |                                       | ou give a financial state   | ment to anyone about your business? Include all financial institutions  |
| L             | ros. i iii iii tile deta   | iis Delovy.                           |                             |   |
|               |  |                                       | Date issued                 |   |
|               | Name   |                                       | MM/DD/YYYY                  |   |
|               | Number Street  | · · · · · · · · · · · · · · · · · · · | _                           |   |
|               | City   | State Zip Code                        | <del></del>                 |   |
| Part 12:      | Sign Below   |                                       |                             |   |
|               |  |                                       |                             | ments, and I declare under penalty of perjury that the answers are<br>lerty, or obtaining money or property by fraud in connection with |
| a ban         | kruptcy case can re  | sult in fines up to \$250,000,        | or imprisonment for up t    | o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  |
|               | *  | ayshon Mosley As sulton               | March 1                     | ×   |
|               | Signature  | of Debtor 1                           | jones of.                   | Signature of Debtor 2   |
|               | Date 8/1   | 1/2017                                | P                           | Date  |
| Did yo        | ou attach additional   | pages to Your Statement of            | Einancial Affaira for India | riduals Filing for Bankruptcy (Official Form 107)?  |
| D N           |  | page to value diagonomy of            | r mancial Alians for filan  | nduals Filing for Bankruptcy (Official Form 107)?   |
| LY.J          | es   |                                       |                             |   |
| L             |  |                                       |                             |   |
| Did yo        | u pay or agree to pa   | ay someone who is not an att          | torney to help you fill out | bankruptcy forms?   |
| ₹ No          | 0  |                                       |                             |   |
|               | es. Name of person   |                                       |                             | Attach the Bankruptcy Petition Preparer's Notice,<br>Declaration, and Signature (Official Form 119).                                    |

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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re:          | Mosley, Nayshon T.                           | ON   |       |
|-----------------|--|--|-------|
|                 | Debtor(s)                                    | Case No  |       |
|                 |  | Chapter. Chapter13   |       |
|                 | VERIFICA                                     | ATION OF CREDITOR MATRIX   |       |
| TI<br>knowledge | he above named Debtors hereby verify t<br>e. | hat the attached list of creditors is true and correct to the best of th | neir  |
| Date:           | 8/11/2017                                    | /s/ Mosley, Nayshon T.  Mosley, Nayshon T.  Signature of Debtor          | lefs_ |

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| Deb  | or 1 Nayshon<br>First Name                                   | T.<br>Middle Name  | Mosley<br>Last Name   | Case number (if known)  |                    |
|------|--|--|---|---|--------------------|
| 16.  | Calculate the median fa                                      | mily income that applies to  |   |   |                    |
|      | 16a. Fill in the state in whi                                |  | Illinois  |   |                    |
|      | 16b. Fill in the number of                                   | ,  | 2   | ì   |                    |
|      |  | · ·  | ***************************************                     |   | <b>#</b> 00 407 00 |
|      | household  | rily income for your state and s   |   | a list of applicable median income amounts, go online   | \$66,487.00        |
|      |  |  | or this form. This list ma                                  | y also be available at the bankruptcy clerk's office.   |                    |
| 17.  | How do the lines compar                                      |  |   |   |                    |
|      | 17a. Line 15b is less t<br>under 11 U.S.C.                   | than or equal to line 16c. On th<br>§ 1325(b)(3). <b>Go to Part 3.</b> D                                     | e top of page 1 of this for NOT fill out <i>Calculation</i> | orm, check box 1, <i>Disposable income is not determined of Disposable Income</i> (Official Form 122C-2).   |                    |
|      | U.S.C. § 1325(b,   | e than line 16c. On the top of p<br>)(3). <b>Go to Part 3 and fill out</b><br>current monthly income from li | Calculation of Disposa                                      | k box 2, Disposable income is determined under 11 ble Income (Official Form 122C-2). On line 39 of that     |                    |
| Part | 3: Calculate Your Co   | mmitment Period Under  | 11 U.S.C. §1325(b)(   | 4)  |                    |
| 18.  | Copy your total average                                      | monthly income from line 11  |   |   | \$5,835.00         |
| 19.  | Deduct the marital adjust commitment period under            | stment if it applies. If you are 11 U.S.C. § 1325(b)(4) allows   | married, your spouse is<br>you to deduct part of yo         | not filing with you, and you contend that calculating the ur spouse's income, copy the amount from line 13. |                    |
|      | 19a. If the marital adjustme                                 | ent does not apply, fill in 0 on I   | ine 19a.  |   | -\$0.00            |
|      | 19b. Subtract line 19a fro                                   | om line 18.  |   |   | \$5,835.00         |
| 20.  | Calculate your current m                                     | onthly income for the year.  | ollow these steps:  |   |                    |
|      | 20a. Copy line 19b.  |  |   |   | \$5,835.00         |
|      | Multiply by 12 (the nu                                       | ımber of months in a year).  |   |   | x 12               |
|      | 20b. The result is your curr                                 | ent monthly income for the yea   | ar for this part of the form                                | <b>1.</b>   | \$70,020.00        |
|      | 20c. Copy the median fam                                     | ily income for your state and si   | ze of household from lin                                    | e 16c.  | \$66,487.00        |
| 21.  | How do the lines compar                                      | e?   |   |   |                    |
| an v | Line 20b is less than li<br>commitment period is             | ne 20c. Unless otherwise order<br>3 years. Go to Part 4.   | ed by the court, on the t                                   | op of page 1 of this form, check box 3, The   |                    |
|      | Line 20b is more than 4, The commitment pe                   | or equal to line 20c. Unless otheriod is 5 years. Go to Part 4.  | nerwise ordered by the co                                   | ourt, on the top of page 1 of this form, check box  |                    |
| Part | : Sign Below   |  |   |   |                    |
|      |  |  |   |   | <b></b>            |
|      | By signing here, I decla                                     | are under penalty of perjury that  | the information on this                                     | statement and in any attachments is true and correct.   |                    |
|      | 🗶 /s/ Nayshon Mo   | sley Karphon 1-1   | Viskert x   |   |                    |
|      | Signature of Debto   | r1   | Si  | gnature of Debtor 2   |                    |
|      | Date 8/11/2017   | _  | Da  | ate   |                    |
|      | MM/DD/YYY  | Υ  |   | MM/DD/YYYY  |                    |
|      | If you checked 17a, do<br>If you checked 17b, fill<br>above. | NOT fill out or file Form 122C out Form 122C-2 and file it wi  | ·2.<br>th this form. On line 39 of                          | of that form, copy your current monthly income from line  | : 14               |

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| Debtor 1   | Nayshon<br>First Name            | T.<br>Middle Name   | Mosley<br>Last Name | Case number (if known) |
|--|----------------------------------|---|---------------------|------------------------|
| Part 4:  | Sign Below                       | with the second | Last Name           |                        |
| By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct. |                                  |   |                     |                        |
| · ——   | layshon Mosley Marghan / Muslef. |   |                     |                        |
| Signa  | ature of Debtor 1                | Ø .   | Signature           | of Debtor 2            |
| Date   | 8/11/2017<br>MM/DD/YYYY          |   | Date<br>MA          | M/DD/YYYY              |
|  |                                  |   |                     |                        |